Wisconsin Home Health Agency Directory

2004

October 2005

Bureau of Health Information and Policy Division of Public Health Wisconsin Department of Health and Family Services

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FOREWORD

Chapter 50.49, Wisconsin Statutes, authorizes and directs the Department of Health and Family Services (DHFS) to develop rules for the licensure of all home health agencies serving Wisconsin residents (Wisconsin Administrative Code, HFS 133, Home Health Agencies). These rules include requirements for reporting information on home health agencies to DHFS through the submittal of licensure application forms provided by the Department. The survey form is attached to the annual report. The Bureau of Health Information and Policy, DHFS, compiles the survey data for use by the Department and others.

The agency profiles presented in this directory are based on survey data collected for the 2004 calendar year. The annual report, to which the survey was attached, is for the period June 1, 2005 through May 31, 2006. The Bureau of Health Information and Policy would like to thank the home health agencies for their participation in the annual surveys.

This directory was produced by the Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy. Jane Conner, research analyst, prepared the directory. She also coordinated and implemented the data collection and editing activities. Kitty Klement, research analyst, and Lu Ann Hahn and Kim Voss, research technicians, participated in the survey follow-up process. The directory was prepared under the supervision of Judith Nugent, chief of the Health Care Information Section. Susan Wood, Director, Bureau of Health Information and Policy, provided overall direction.

Inquiries concerning the information presented in this publication should be directed to the Bureau of Health Information and Policy, Division of Public Health, Wisconsin Department of Health and Family Services, P.O. Box 2659, Madison, WI 53701-2659. You may telephone Jane Conner at (608) 267-9055 or e-mail her at connejp@dhfs.state.wi.us.

All publications produced by the Bureau of Health Information and Policy can be found online, at http://dhfs.wisconsin.gov/stats.

To obtain a printed copy of this directory, please send a \$25.00 check (made payable to the Division of Public Health), along with a note requesting the 2004 Home Health Agency Directory, to the following address:

Division of Public Health
Bureau of Health Information and Policy
ATTN: Sue Smith
P. O. Box 2659
Madison, WI 53701-2659

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INTRODUCTION

Home health agencies have been an integral part of the Wisconsin health care delivery system since the early 1960s. The Wisconsin Annual Survey of Home Health Agencies was begun in 1984 to systematically collect information about the characteristics of home health agencies and the patients they served. The purpose of the survey is to generate information useful to various programs in the Department of Health and Family Services, home health agency administrators, public and private health care professionals, and other interested citizens.

This directory presents data for the 147 home health agencies that submitted an application for an annual report for 2004. Agency profiles include detailed information about individual home health agencies for 2004. The agency profiles are organized alphabetically by county of location, and by city within each county. The indices included at the back of this directory list all agencies statewide by county, city, name of agency, and license number assigned to each agency by the Bureau of Quality Assurance, Division of Disability and Elder Services.

Data contained in each profile are agency-specific and appear most frequently in the form of percentages. Caution should be used when comparing percentages for agencies with small numbers of patients because of the high potential for variability. Throughout these profiles, a " . " in any category indicates that the data were not provided by the agency.

The following information is presented for each agency:

- 1. Identifying information, including agency name, address, city, zip code, county, telephone number and license number.
- 2. Agency characteristics, such as type of ownership, certification for Medicare (Title 18) and Medicaid (Title 19), any affiliation with a hospital, and counties served by the agency.
- 3. Agency utilization measures, including the number of patients, visits and visits per patient by type of service.
- 4. Profiles of the percentage of patients served during the year, by patients' age, sex, reimbursement source and primary diagnosis. The profiles of the percentage of patients by age, sex and primary diagnosis describe an unduplicated count of patients served during calendar year 2004. The profile by reimbursement source is based on the agency's last completed fiscal year and describes a duplicated count of patients.
- 5. Revenue and expenses for the agency's last completed fiscal year.
- 6. The percentage of admissions by referral source and the discharge status or care destination for patients discharged.
- 7. Number of full-time equivalent employees (FTEs). Staffing data does not include information about consultants or contracted staff.

To assist the reader in converting the percentages shown in each profile to a comparable number of patients, an example is provided using data from the Hess Home Health in Mauston (Page 47). To calculate the number of patients served by this agency who were age 75 to 84, divide the percentage for the age group (37.7) by 100 (.377) and multiply the result by the total number of patients served during the year (154). The product (.377 x 154) is 58.058, which when rounded to 58 is the number of unduplicated patients age 75 to 84 served by this agency during the 2004 calendar year.



Moundview Memorial Hospital and Clinic 450 East State Street Adams WI 53910 Adams County

COUNTIES SERVED Adams Juneau Waushara

308) 339-7076							Wood			
License Number: Ownership of Ac		profit	. Asso	ciation					TOTAL NUMBER OF ADMISSIONS	202
Title 18 (Medic Title 19 (Medic Department of a Number of undur	care) cert caid) cert a hospital	ified? ified? .?	? Y ? Y Y	es es es	200				PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	3.5% 56.9 11.4 28.2
SERVICES PROVID	DED	NO. PATIE		NO. OF VISITS	VISITS PATIE				TOTAL NUMBER OF DISCHARGES (Including Deaths)	202
Skilled Nursi	lng		197	1,764	9.0)			, , , , , , , , , , , , , , , , , , , ,	
Home Health A			61	683	11.2	2			PERCENT DISCHARGES TO:	
Physical Ther	rapy		56	464	8.3	3			Private Residences	57.9%
Spch/Occ/Resp	Therapy		28	137	4.9	9			General Hospitals	5.0
Medical Socia	al Service	<u> </u>	0	0	0.0)			Nursing Homes	7.9
Private Duty			0	0	0.0				Deaths	2.5
Personal Care			52	3,268	62.8				Other	26.7
Other Home He			2	36	18.0					
Homemkr & Oth	ner Non HH		0	0	0.0					
TOTAL		XXXX	XXXX	6,352	XXXX	ζ				
AGE AND SEX OF	PATIENTS	I	PATIEN	T REIMBUR	SEMENT S	SOURCE				
Under 4	0.0%	_		.care		64.9%				
4 to 34	1.5			caid		25.7				
35 to 54	9.5		Othe	r Federal		0.0				
55 to 64	12.0		Stat	e Funds		0.0			STAFFING	FTES
65 to 74	26.5		Priv	ate Insur	ance	9.4			Administrators	1.0
75 to 84	34.0		Self	Pay		0.0			Reg. Nurse Supervisors	1.0
85 & over	16.5		Othe	er		0.0			Registered Nurses	2.1
				L PATIENT	'S	245			Licensed Practical Nurses	0.0
Males 39.0%	Females	61.0	%						Home Health Aides	0.7
	D.D.	TMADE	DIAGN	годта			DEVENUE		Physical Therapists	0.2
Infectious Di		RIMARY		stive Diso	ndona '	L.0%	REVENUE Billings \$		Occupational Therapists 9 Speech Pathologists	0.0
Cancer	isolueis			courinary		3.5	Billings \$ Disallowances	-10,332		0.0
Diabetes				& Childb	4	0.0	Collections	429,032		0.0
Diseases of E	Slood.			copathies		3.0	Other	·	0 Other Therapeutic Staff	0.0
Dementia/Alzh				pathies		0.0	Total	429,033		3.4
Psychoses/Neu				atal Peri		0.0	10041	125,05	Homemakers	0.0
Central Nervo				efined Co		3.0	EXPENSE	ES	Other Staff	1.5
Paralysis/CP	7		Fract			2.5	Total \$	485,28		10.0
Cardiovascula	ar	13.0	Wound	ls, Burns		L.5	·	,		
Stroke				. of Surg		L.5				
Respiratory			_	Conditio	-	2.0				

Bay Area Health, LLC 1601 Beaser Avenue Ashland WI 54806

Ashland County

COUNTIES SERVED
Ashland
Bayfield
Iron

(715) 682-9500

License Number: 251 Ownership of Agency: Lim	nited Liability Comm	anv		:	TOTAL NUMBER OF ADMISSIONS	176
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No	276		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	47.7% 29.5 22.2 0.6
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF PATIENTS 144 2,111	VISITS PER PATIENT 14.7		:	FOTAL NUMBER OF DISCHARGES (Including Deaths)	161
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy	24 621 8 62 0 0	25.9 7.8 0.0		1	PERCENT DISCHARGES TO: Private Residences General Hospitals	45.3% 29.8
Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care	0 0 apv. 262 28,446	0.0 0.0 108.6 0.0			Nursing Homes Deaths Other	7.5 8.1 9.3
Homemkr & Other Non HE	H 176 31,471 XXXXXXX 62,711	178.8 XXXXX				
AGE AND SEX OF PATIENTS Under 4 0.4% 4 to 34 7.6 35 to 54 16.3	PATIENT REIMBU Medicare Medicaid Other Federa	16.1% 60.5				
55 to 64 14.1 65 to 74 13.8 75 to 84 23.2 85 & over 24.6	State Funds Private Insu Self Pay Other	0.0		s.	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses	FTES 1.0 0.0 5.1
Males 38.8% Females		TS 286			Licensed Practical Nurses Home Health Aides Physical Therapists	0.0 0.6 0.0
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	RIMARY DIAGNOSIS 0.7% Digestive Dis 2.5 Genitourinary 3.3 Preg. & Child 1.1 Arthropathies 6.2 Osteopathies 7.6 Perinatal Per 2.2 Ill-Defined C 2.2 Fractures 8.3 Wounds, Burns 5.4 Compl. of Sur 3.3 Other Conditi	Sys. 2.9 birth 0.0 7.2 1.4 iod 0.4 ond. 10.5 3.3 5.1 gery 0.0	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	2,524,558 209,864 2,314,694 7,124 2,321,818 2,317,098	Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.0 0.0 0.0 0.0 0.0 29.6 32.7 7.0 75.9

Lakeview Medical Center		COUNTIES SERVED		
212 South Main Street		Barron		
Rice Lake WI 54868	Barron County	Polk		
(715) 236-6256	-	Rusk Sawyer		
		Wasĥburn		
License Number: 151			TOTAL NUMBER OF ADMISSIONS 289	
Ownership of Agency: No				
Title 18 (Medicare) cer			PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert			Private Residences 3.1%	
Department of a hospital			General Hospitals 76.1	
Number of unduplicated p	patients in 2004 = 302		Nursing Homes 13.1	
			Other 7.6	
	W			
GERUITGEG PROUTRER	NO. OF NO. OF VISITS PER		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT		(Including Deaths) 295	
Skilled Nursing	302 3,042 10.1 253 2,619 10.4		PERCENT DISCHARGES TO:	
Home Health Aide	253 2,619 10.4 243 1,294 5.3		Private Residences 80.7%	
Physical Therapy Spch/Occ/Resp Therapy				
Medical Social Service			General Hospitals 4.1 Nursing Homes 3.4	
Private Duty Nursing	0 0 0.0		Deaths 3.1	
Personal Care/PC RN S			Other 8.8	
Other Home Health Care	- L		0.0	
Homemkr & Other Non H				
TOTAL	XXXXXXX 7,259 XXXXX			
	·			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURC	3		
Under 4 0.3%	Medicare 81.8	5		
4 to 34 1.7	Medicaid 3.5			
35 to 54 6.0	Other Federal 0.0			
55 to 64 11.6	State Funds 0.0		STAFFING FTES	
65 to 74 22.2	Private Insurance 12.4		Administrators 0.5	
75 to 84 36.4	Self Pay 0.3		Reg. Nurse Supervisors 0.5	
85 & over 21.9	Other 2.0 TOTAL PATIENTS 346		Registered Nurses 6.1 Licensed Practical Nurses 0.0	
Males 38.4% Females	101AL PATTENTS 346		Licensed Practical Nurses 0.0 Home Health Aides 3.0	
Males 30.4% remales	01.0 %		Physical Therapists 1.0	
Pi	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists 0.1	
	11.9% Digestive Disorders 2.0%	Billings \$ 838,934		
Cancer	5.6 Genitourinary Sys. 1.7	Disallowances -156,112		
Diabetes	6.6 Preg. & Childbirth 0.0	Collections 995,046		
Diseases of Blood	0.7 Arthropathies 7.9	Other 148	Other Therapeutic Staff 0.0	
Dementia/Alzheimers	0.0 Osteopathies 2.3	Total 995,194	Personal Care Workers 0.0	
Psychoses/Neuroses	1.0 Perinatal Period 0.3		Homemakers 0.0	
Central Nervous Sys.	1.3 Ill-Defined Cond. 29.5	EXPENSES	Other Staff 1.5	
Paralysis/CP	0.3 Fractures 0.3	Total \$ 862,172	TOTAL FTES 12.7	
Cardiovascular	13.6 Wounds, Burns 0.7			
Stroke	4.0 Compl. of Surgery 1.0			
Respiratory	4.6 Other Conditions 4.6			

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COUNTIES SERVED Bayfield

Bayfield County Health Department 117 East 5th Street, PO Box 403 Washburn WI 54891 Ba Bayfield County

(715) 373-6109

13, 373 0103			
License Number: 11 Ownership of Agency: Cou	intv	TOTAL NUMBER OF ADMISSIONS 7	12
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No	PERCENT ADMISSIONS FROM: Private Residences 12.5 General Hospitals 62.5 Nursing Homes 25.0 Other 0.0	5
	NO. OF NO. OF VISITS PE	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT		12
Skilled Nursing	64 603 9.4	(======================================	
Home Health Aide	20 498 24.9	PERCENT DISCHARGES TO:	
Physical Therapy	47 450 9.6	Private Residences 87.5	ું ે
Spch/Occ/Resp Therapy		General Hospitals 8.3	
Medical Social Service		Nursing Homes 2.8	
Private Duty Nursing	0 0 0.0	Deaths 0.0	j
Personal Care/PC RN Su	0.0 vqu	Other 1.4	:
Other Home Health Care	0 0 0.0		
Homemkr & Other Non HH	0.0 O		
TOTAL	XXXXXXX 1,573 XXXXX		
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOU		
Under 4 0.0%	Medicare 76		
4 to 34 0.0		2	
35 to 54 13.5			
55 to 64 9.5		STAFFING FTES	
65 to 74 25.7	Private Insurance 11		
75 to 84 32.4	2	Reg. Nurse Supervisors 1.0	
85 & over 18.9		Registered Nurses 1.0	
M-1 51 49 D1	TOTAL PATIENTS	Licensed Practical Nurses 0.0	
Males 51.4% Females	48.6 %	Home Health Aides 0.6	
DE	RIMARY DIAGNOSIS	Physical Therapists 0.0 REVENUE Occupational Therapists 0.0	
Infectious Disorders	0.0% Digestive Disorders 2.7	REVENUE Occupational Therapists 0.0 Billings \$ 188,214 Speech Pathologists 0.0	
Cancer	8.1 Genitourinary Sys. 1.4	Disallowances 40,235 Respiratory Therapists 0.0	
Diabetes	2.7 Preg. & Childbirth 0.0	Collections 147,979 Medical Social Workers 0.0	
Diseases of Blood	1.4 Arthropathies 6.8	Other 10 Other Therapeutic Staff 0.0	
Dementia/Alzheimers	0.0 Osteopathies 1.4	Total 147,989 Personal Care Workers 0.0	
Psychoses/Neuroses	0.0 Perinatal Period 0.0	Homemakers 0.0	
Central Nervous Sys.	0.0 Ill-Defined Cond. 12.2	EXPENSES Other Staff 0.8	
Paralysis/CP	0.0 Fractures 4.1	Total \$ 248,658 TOTAL FTES 4.4	
	10.8 Wounds, Burns 2.7	1.1	
Stroke	2.7 Compl. of Surgery 13.5		
Respiratory	1.4 Other Conditions 28.4		

Aurora VNA of Wisconsin 931 Discovery Road Green Bay WI 54311 (920) 288-5100	Brown County		COUNTIES SERVED Brown Burnett Door Kewaunee		
License Number: 1008 Ownership of Agency: Nor Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? Yes	554	Manitowoc Milwaukee Oconto Outagamie Shawano Washington Waupaca	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	513 79.1% 17.9 1.9
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non He	PATIENTS VISITS 463 5,584 144 4,312 221 1,651 116 633 57 79 3 3 apv. 86 4,366 6 0 0	VISITS PER PATIENT 12.1 29.9 7.5 5.5 1.4 1.0 50.8 0.0 42.0 XXXXX		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	512 78.9% 3.3 10.2 2.0 5.7
Under 4 5.8% 4 to 34 7.4 35 to 54 15.3 55 to 64 13.2 65 to 74 17.9 75 to 84 24.5 85 & over 15.9 Males 42.8% Females PH Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	Medicare Medicaid Other Federal State Funds Private Insura Self Pay Other TOTAL PATIENTS 57.2 % RIMARY DIAGNOSIS 0.0% Digestive Disor 5.4 Genitourinary S 6.5 Preg. & Childbi 2.0 Arthropathies 0.5 Osteopathies 1.4 Perinatal Perio 1.6 Ill-Defined Con 2.7 Fractures 15.2 Wounds, Burns 0.0 Compl. of Surge 5.2 Other Condition	56.0% 15.2 0.0 0.0 15.2 0.0 0.0 55.3 3.6 0.0 554 ders 4.9% ys. 4.2 rth 0.2 21.5 0.5 d 0.7 d. 5.4 1.6 4.9 ry 11.4	REVENUE Billings \$ 1,517,749 Disallowances 197,165 Collections 1,320,584 Other 794 Total 1,321,378 EXPENSES Total \$ 1,939,351	Respiratory Therapists	FTES 1.0 1.0 8.6 0.4 9.3 2.2 0.5 0.0 2.0 1.0 2.2 0.0 0.0 6.0 34.1

Bellin Home Health Agency 617 South Roosevelt Street Green Bay WI 54301 (920) 432-5434 License Number: 14 Ownership of Agency: No	Brown County nprofit Corporation		COUNTIES SERVED Brown Calumet Door Kewaunee Manitowoc Marinette Oconto	TOTAL NUMBER OF ADMISSIONS	695
Title 18 (Medicare) cert			Outagamie Shawano	PERCENT ADMISSIONS FROM: Private Residences	37.8%
Department of a hospital	1? Yes		2114114114	General Hospitals	51.2
Number of unduplicated p	patients in 2004 = 796			Nursing Homes Other	3.9 7.1
SERVICES PROVIDED	NO. OF NO. OF VISIT PATIENTS VISITS PATI	'S PER ENT		TOTAL NUMBER OF DISCHARGES (Including Deaths)	676
Skilled Nursing	692 6,626 9	.6		.	
Home Health Aide	,	.3		PERCENT DISCHARGES TO:	
Physical Therapy	,	.0 .6		Private Residences General Hospitals	77.5% 3.7
Spch/Occ/Resp Therapy Medical Social Service		.1		Nursing Homes	3.7 4.7
Private Duty Nursing	1 141 141			Deaths	3.8
Personal Care/PC RN Si		. 7		Other	10.2
Other Home Health Care		.0			
Homemkr & Other Non H	H 0 0 0	.0			
TOTAL	XXXXXXX 16,481 XXX	XX			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT	SOURCE			
Under 4 6.7%	Medicare	65.2%			
4 to 34 4.5	Medicaid	12.7			
35 to 54 12.2	Other Federal	0.0			
55 to 64 10.8	State Funds	0.0		STAFFING	FTES
65 to 74 16.1	Private Insurance	15.8		Administrators	1.0
75 to 84 28.0 85 & over 21.7	Self Pay Other	1.6 4.6		Reg. Nurse Supervisors Registered Nurses	2.6 9.4
85 & Over 21.7	TOTAL PATIENTS	4.6 796		Licensed Practical Nurses	9.4 0.6
Males 45.6% Females	54.4 %	790		Home Health Aides Physical Therapists	8.0
Pl	RIMARY DIAGNOSIS		REVENUE	Occupational Therapists	0.0
Infectious Disorders	0.9% Digestive Disorders	1.4%	Billings \$ 1,954,241		0.0
Cancer	2.3 Genitourinary Sys.	1.4	Disallowances 202,328		0.0
Diabetes	4.5 Preg. & Childbirth	0.4	Collections 1,751,913		0.7
Diseases of Blood	1.1 Arthropathies	3.6	Other 63,651	-	0.0
Dementia/Alzheimers	0.8 Osteopathies	0.5	Total 1,815,564		0.0
Psychoses/Neuroses	3.0 Perinatal Period 2.1 Ill-Defined Cond.	0.4 5.7	EXPENSES	Homemakers Other Staff	0.0 4.6
Central Nervous Sys. Paralysis/CP	1.6 Fractures	1.0	Total \$ 2,155,062		29.7
Cardiovascular	13.6 Wounds, Burns	1.1	7 2,133,002	1011111 11110	20.1
Stroke	0.3 Compl. of Surgery	2.9			
Respiratory		48.6			
=					

Heartland Home Health Care 2050 Riverside Drive, 1st F Green Bay WI 54301 (920) 436-9380 License Number: 218 Ownership of Agency: Pr Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	Brown County oprietary Corporation tified? Yes tified? Yes tal? No	COUNTIES SERVED Brown Calumet Manitowoc Oconto Outagamie Shawano Waupaca Winnebago	TOTAL NUMBER OF ADMISSIONS 221 PERCENT ADMISSIONS FROM: Private Residences 27.1% General Hospitals 30.8 Nursing Homes 33.5
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Servic Private Duty Nursing Personal Care/PC RN S Other Home Health Car Homemkr & Other Non H	e 13 20 1.5 0 0 0.0 upv. 12 247 20.6 e 0 0 0.0		Other 8.6 TOTAL NUMBER OF DISCHARGES (Including Deaths) 188 PERCENT DISCHARGES TO: Private Residences 76.1% General Hospitals 3.2 Nursing Homes 4.8 Deaths 2.1 Other 13.8
	PATIENT REIMBURSEMENT SOURCE Medicare Medicaid Other Federal Other Federal State Funds Private Insurance Self Pay Other TOTAL PATIENTS 55.0 % RIMARY DIAGNOSIS 1.4% Digestive Disorders 4.1 Genitourinary Sys. 4.1 Preg. & Childbirth 0.5 Arthropathies 0.5 Arthropathies 0.4 Osteopathies 0.5 Perinatal Period 0.0 1.8 Ill-Defined Cond. 1.8 Ill-Defined Cond. 1.8 Wounds, Burns 1.8 Compl. of Surgery 5.0 Other Conditions 32.6	ફે ર	STAFFING FTES Administrators 1.0 Reg. Nurse Supervisors 1.0 Registered Nurses 2.6 Licensed Practical Nurses 0.0 Home Health Aides 5.1 Physical Therapists 1.5 Occupational Therapists 0.2 Speech Pathologists 0.0 Respiratory Therapists 0.0 Medical Social Workers 0.1 Other Therapeutic Staff 0.0 Personal Care Workers 0.0 Homemakers 0.0 Other Staff 2.0 TOTAL FTES 13.5

Page 8 Home Care Advantage 120 South Webster Avenue COUNTIES SERVED Brown

Green Bay WI 54301 Brown County

(920) 437-0496

20, 13, 0130				
License Number: 154 Ownership of Agency: Pro	oprietary Corporatio	n	TOTAL NUMBER OF ADM	ISSIONS 0
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No	7	PERCENT ADMISSIONS I Private Residence General Hospitals Nursing Homes Other	s 0.0%
	NO. OF NO. OF	VISITS PER	TOTAL NUMBER OF DISC	CHARGES
SERVICES PROVIDED	PATIENTS VISITS	PATIENT	(Including Deat)	hs) 1
Skilled Nursing	2 106	53.0	,g	
Home Health Aide	0 0	0.0	PERCENT DISCHARGES	TO:
Physical Therapy	0 0	0.0	Private Residence	s 0.0%
Spch/Occ/Resp Therapy	5 3,816	763.2	General Hospitals	
Medical Social Service		0.0	Nursing Homes	100.0
Private Duty Nursing	0 0	0.0	Deaths	0.0
Personal Care/PC RN Su	ipv. 4 423	105.8	Other	0.0
Other Home Health Care	e 0 0	0.0		
Homemkr & Other Non HH	0 0 H	0.0		
TOTAL	XXXXXXX 4,345	XXXXX		
AGE AND SEX OF PATIENTS	PATIENT REIMBU	DODMENT COIDE		
Under 4 14.3%	Medicare	0.0%		
4 to 34 57.1	Medicale	100.0		
35 to 54 0.0	Other Federa			
55 to 64 0.0	State Funds	0.0	STAFFING	FTES
65 to 74 14.3	Private Insu		Administrators	1.0
75 to 84 14.3	Self Pay	0.0	Req. Nurse Superv	
85 & over 0.0	Other	0.0	Registered Nurses	
	TOTAL PATIEN		Licensed Practical	
Males 71.4% Females	28.6 %		Home Health Aides	
			Physical Therapis	ts 0.0
PR	RIMARY DIAGNOSIS		REVENUE Occupational Thera	
Infectious Disorders	0.0% Digestive Dis		Billings \$ 1,306,366 Speech Pathologist	
Cancer	0.0 Genitourinary		Disallowances 358,075 Respiratory Therap	
Diabetes	0.0 Preg. & Child		Collections 948,291 Medical Social Wo:	
Diseases of Blood	0.0 Arthropathies		Other 0 Other Therapeutic	
Dementia/Alzheimers	0.0 Osteopathies	14.3	Total 948,291 Personal Care World	
Psychoses/Neuroses	0.0 Perinatal Per		Homemakers	0.0
Central Nervous Sys.	0.0 Ill-Defined C		EXPENSES Other Staff	4.1
Paralysis/CP	0.0 Fractures	0.0	Total \$ 1,053,661 TOTAL FTES	22.1
Cardiovascular	0.0 Wounds, Burns			
Stroke	0.0 Compl. of Sur			
Respiratory	0.0 Other Conditi	ons 85.7		

Interim Healthcare of Northeastern Wisconsin

2555 Continental Court, #4 Green Bay WI 54311

Brown County

COUNTIES SERVED Brown Oconto Outagamie

(920) 494	-9444
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20) 494-9444				odeagamie			
License Number: 266 Ownership of Agency: Pr	oprietary Co	orporation	1			TOTAL NUMBER OF ADMISSIONS	14
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? tified? tal?	Yes Yes No	47			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	28.6% 7.1 14.3 50.0
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	16
Skilled Nursing	30	3,325	110.8				
Home Health Aide	30	6,878	229.3			PERCENT DISCHARGES TO:	
Physical Therapy	0	0	0.0			Private Residences	31.3%
Spch/Occ/Resp Therapy		684	684.0			General Hospitals	18.8
Medical Social Service		0	0.0			Nursing Homes	12.5
Private Duty Nursing	0	0	0.0			Deaths Other	12.5
Personal Care/PC RN S Other Home Health Car		2,525 0	74.3 0.0			other	25.0
Homemkr & Other Non H		0	0.0				
TOTAL	XXXXXXX	13,412	XXXXX				
IOIAL	XXXXXX	13,412	XXXXX				
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	RSEMENT SOURCE				
Under 4 0.0%	Med	icare	1.8%				
4 to 34 14.9	Med	icaid	68.4				
35 to 54 31.9	Oth	er Federal	1.8				
55 to 64 21.3	Stat	te Funds	0.0			STAFFING	FTES
65 to 74 12.8	Pri	vate Insur	cance 5.3			Administrators	1.0
75 to 84 17.0	Sel:	f Pay	3.5			Reg. Nurse Supervisors	1.3
85 & over 2.1	Oth	er	19.3			Registered Nurses	2.0
	TOT	AL PATIENT	TS 57			Licensed Practical Nurses	2.3
Males 53.2% Females	46.8 %					Home Health Aides	6.8
						Physical Therapists	0.0
_	RIMARY DIAG			REVENUE		Occupational Therapists	0.0
Infectious Disorders	4.3% Dige			Billings \$	980,868	Speech Pathologists	0.0
Cancer	0.0 Geni			Disallowances	304,867	Respiratory Therapists	0.0
Diabetes	12.8 Preg			Collections	676,001	Medical Social Workers	0.0
Diseases of Blood	0.0 Arth:		0.0	Other	129	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteo		2.1 Lod 0.0	Total	676,130	Personal Care Workers Homemakers	0.2
Psychoses/Neuroses Central Nervous Sys.	8.5 Ill-1			EXPENSES		Other Staff	1.0
Paralysis/CP	21.3 Fract		2.1	Total \$	731,381	TOTAL FTES	14.5
Cardiovascular	12.8 Wound		4.3	iocai ș	, , , , , , , ,	IOIVI LIES	14.0
Stroke	4.3 Comp.						
Respiratory	2.1 Othe:		, ±				
respiracory	2.1 00110.	. COMMICIC	11.0				

St. Vincent Hospital Home He 1920 South Libal Street Green Bay WI 54301 (920) 448-7000 License Number: 35	alth Care Brown Cou	unty		COUNTIES SERVED Brown Door Kewaunee Manitowoc Oconto Outagamie		TOTAL NUMBER OF ADMISSIONS	2,539
Ownership of Agency: Non Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	ified? Yes ified? Yes ? Yes	s s	287	Shawano		PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	35.0% 65.0 0.0
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH TOTAL	PATIENTS 2,124 89 1,098 524 199 0 pv. 148 0 19	VISITS PA 14,074 8,424 7,670 4,853 668 0 4,372 0 1,357	SITS PER ATIENT 6.6 94.7 7.0 9.3 3.4 0.0 29.5 0.0 71.4 XXXXX			TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	2,416 88.7% 3.0 3.0 0.6 4.7
AGE AND SEX OF PATIENTS Under 4 40.9% 4 to 34 5.7 35 to 54 9.0 55 to 64 6.6 65 to 74 8.1 75 to 84 16.8 85 & over 12.8 Males 45.9% Females PR Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	Medica Medica Other State Privat Self I Other TOTAL 54.1 % IMARY DIAGNOS 0.8% Digests 0.6 Genitos 3.0 Preg. 8 0.7 Arthrop 0.2 Perinat 1.8 Ill-Des 0.7 Fractus 5.4 Wounds 0.6 Compl.	aid Federal Funds te Insurance Pay PATIENTS SIS ive Disorder urinary Sys & Childbirth pathies athies tal Period fined Cond. res	36.1% 9.5 0.0 0.0 49.4 3.8 1.2 2,472 rs 1.4% 0.0 h 0.1 2.1 0.0 34.9 1.3 8.9 0.0	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	5,764,864 1,044,697 4,720,167 66,774 4,786,941	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 1.0 6.0 11.7 0.2 5.7 6.4 1.8 2.5 0.0 0.4 2.2 10.0 0.7 12.4 61.0

(/13) 343-/600	(715)	349-	7	6	0	C
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15) 349-7600							
License Number: 41 Ownership of Agency: Cou	ınty				•	TOTAL NUMBER OF ADMISSIONS	94
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Your ified? You al?		103		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	18.1% 59.6 22.3 0.0
	NO. OF	NO. OF	VISITS PER		•	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	91
Skilled Nursing	103	731	7.1				
Home Health Aide	47	1,166	24.8		1	PERCENT DISCHARGES TO:	
Physical Therapy	42	131	3.1			Private Residences	64.8%
Spch/Occ/Resp Therapy	23	73	3.2			General Hospitals	14.3
Medical Social Service		0	0.0			Nursing Homes	12.1
Private Duty Nursing	0	0	0.0			Deaths	5.5
Personal Care/PC RN Su		0	0.0			Other	3.3
Other Home Health Care		0	0.0				
TOTAL	XXXXXXX	2,101	XXXXX				
IOIAL	ΛΛΛΛΛΛ	2,101	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATIEN'	T REIMBURS	EMENT SOURCE				
Under 4 1.9%	Medi	care	55.9%				
4 to 34 3.9	Medi	caid	12.6				
35 to 54 9.7	Othe:	r Federal	0.0				
55 to 64 7.8	State	e Funds	0.0		:	STAFFING	FTES
65 to 74 20.4		ate Insura				Administrators	0.3
75 to 84 40.8	Self	4	11.7			Reg. Nurse Supervisors	0.0
85 & over 15.5	Othe:		4.5			Registered Nurses	1.5
		L PATIENTS	111			Licensed Practical Nurses	0.0
Males 44.7% Females	55.3 %					Home Health Aides	0.8
מת	IMARY DIAGNO	OCTC		REVENUE		Physical Therapists Occupational Therapists	0.0
Infectious Disorders	1.9% Diges		ders 5.8%	Billings \$	215,610	Speech Pathologists	0.0
Cancer	4.9 Genit			Disallowances	53,998	Respiratory Therapists	0.0
Diabetes		& Childbi		Collections	161,612	Medical Social Workers	0.0
Diseases of Blood	1.0 Arthro		16.5	Other	5,087	Other Therapeutic Staff	0.0
Dementia/Alzheimers	1.0 Osteo		2.9	Total	166,699	Personal Care Workers	0.0
Psychoses/Neuroses	1.0 Perin	atal Perio	0.0		•	Homemakers	0.0
Central Nervous Sys.	1.9 Ill-D	efined Cond	d. 7.8	EXPENSES		Other Staff	0.7
Paralysis/CP	2.9 Fract		8.7	Total \$	229,860	TOTAL FTES	3.3
Cardiovascular		s, Burns	5.8				
Stroke	1.9 Compl						
Respiratory	5.8 Other	Conditions	s 14.6				

COUNTIES SERVED Burnett

Calumet County Health Department Home Health Agency COUNTIES SERVED 206 Court Street, Courthouse Calumet Chilton WI 53014 Calumet County Fond du Lac Manitowoc (920) 849-1424 Sheboygan License Number: 42 TOTAL NUMBER OF ADMISSIONS 114 Ownership of Agency: County Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 52.6% Affiliated with a hospital? General Hospitals No 24.6 Number of unduplicated patients in 2004 = 163 Nursing Homes 19.3 Other 3.5 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES SERVICES PROVIDED PATIENTS VISITS PATIENT (Including Deaths) 125 Skilled Nursing 156 2,709 17.4 PERCENT DISCHARGES TO: Home Health Aide 86 2,732 31.8 Physical Therapy 52 472 9.1 Private Residences 64.0% Spch/Occ/Resp Therapy 30 265 8.8 General Hospitals 20.8 Medical Social Service 0 0.0 Nursing Homes Ω 8.8 Private Duty Nursing 0 0 0.0 Deaths 1.6 Personal Care/PC RN Supv. 15.6 Other 93 1,454 4.8 Other Home Health Care Ω 0 0.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 7,632 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 0.0% Medicare 56.1% 4 to 34 0.6 Medicaid 14.5 35 to 54 Other Federal 4.9 10.7 55 to 64 STAFFING FTES 4.9 State Funds 0.0 65 to 74 12.9 Private Insurance 5.1 Administrators 0.1 75 to 84 Req. Nurse Supervisors 31.9 Self Pav 13.6 0.1 85 & over 44.8 Registered Nurses 3.9 Other 0.0 TOTAL PATIENTS 214 Licensed Practical Nurses 0.0 Males 41.7% Females 58.3 % Home Health Aides 3.9 Physical Therapists 0.0 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.0 Infectious Disorders 1.2% Digestive Disorders Speech Pathologists 0.0% Billings 528,710 0.0 Cancer 6.1 Genitourinary Sys. 2.5 Disallowances 22,419 Respiratory Therapists 0.0 Diabetes 6.1 Preq. & Childbirth 0.0 Collections 506,291 Medical Social Workers 0.0 0.6 Arthropathies Diseases of Blood Other Therapeutic Staff 9.8 Other 65,024 0.0 Dementia/Alzheimers 2.5 Osteopathies 1.8 Total 571,315 Personal Care Workers 0.5 2.5 Perinatal Period Psvchoses/Neuroses 0.0 Homemakers 0.0 Central Nervous Sys. 3.1 Ill-Defined Cond. EXPENSES Other Staff 9.2 1.5 Paralysis/CP 0.0 Fractures 9.2 Total 531,379 TOTAL FTES 10.0 Cardiovascular 18.4 Wounds, Burns 4.9 Stroke 4.3 Compl. of Surgery 0.6

13.5

3.7 Other Conditions

Respiratory

COUNTIES SERVED Chippewa

Chippewa County Department of Public Health
711 North Bridge Street, Room 222
Chippewa Falls WI 54729 Chippewa County

(715) 726-7900

15) 726-7900							
License Number: 43 Ownership of Agency: Cou Title 18 (Medicare) cert		5				TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM:	264
Title 19 (Medicaid) cert		5				Private Residences	61.0%
Affiliated with a hospit						General Hospitals	20.5
Number of unduplicated p	oatients in 20	004 =	388			Nursing Homes	15.9
						Other	2.7
SERVICES PROVIDED		NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	262
Skilled Nursing	315	4,226	13.4				
Home Health Aide	157	5,579	35.5			PERCENT DISCHARGES TO:	
Physical Therapy	89	947	10.6			Private Residences	61.1%
Spch/Occ/Resp Therapy	34	263	7.7			General Hospitals	7.3
Medical Social Service	9 0	0	0.0			Nursing Homes	19.8
Private Duty Nursing	0	0	0.0			Deaths	7.6
Personal Care/PC RN Su		7,122	34.6			Other	4.2
Other Home Health Care		0	0.0				
Homemkr & Other Non HF		0	0.0				
TOTAL	XXXXXXX 1	18,137	XXXXX				
AGE AND SEX OF PATIENTS	PATTENT	RETMBIIRS	SEMENT SOURCE				
Under 4 0.0%	Medica		45.9%				
4 to 34 1.5	Medica		40.0				
35 to 54 11.1		Federal	0.0				
55 to 64 6.2		Funds	0.0			STAFFING	FTES
65 to 74 17.8		te Insura				Administrators	1.0
75 to 84 32.2	Self F		6.8			Req. Nurse Supervisors	1.0
85 & over 31.2	Other	7	1.0			Registered Nurses	6.9
		PATIENTS				Licensed Practical Nurses	0.0
Males 36.9% Females						Home Health Aides	5.1
						Physical Therapists	0.0
PF	RIMARY DIAGNOS	SIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digesti	ive Disor	ders 3.1%	Billings \$	1,453,648	Speech Pathologists	0.0
Cancer	0.0 Genitou	urinary S	Sys. 2.6	Disallowances	291,531	Respiratory Therapists	0.0
Diabetes	0.0 Preg. 8	& Childdbi	rth 0.0	Collections	1,162,117	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthrop	oathies	26.5	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopa	athies	0.0	Total	1,162,117	Personal Care Workers	3.5
Psychoses/Neuroses	0.3 Perinat		od 0.0			Homemakers	0.0
Central Nervous Sys.	0.0 Ill-Def	fined Cor	nd. 21.1	EXPENSES		Other Staff	4.5
Paralysis/CP	0.0 Fractur		0.0	Total \$	1,252,368	TOTAL FTES	22.0
Cardiovascular	17.0 Wounds,		9.8				
Stroke	0.0 Compl.						
Respiratory	6.4 Other (Condition	ns 13.1				

St. Joseph's Hospital Home II 2661 County Highway I Chippewa Falls WI 54729 (715) 726-3485 License Number: 158 Ownership of Agency: Nor Title 18 (Medicare) cert	Chippewa County		COUNTIES SERVED Buffalo Chippewa Dunn Eau Claire Jackson Taylor Trempealeau	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM:	576
Title 19 (Medicaid) cert				Private Residences	16.5%
Department of a hospital		F.0.0		General Hospitals	65.6
Number of unduplicated p	patients in 2004 =	590		Nursing Homes Other	10.8 7.1
				other	/.1
	NO. OF NO. OF V	ISITS PER		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT		(Including Deaths)	579
Skilled Nursing	487 5,099	10.5			
Home Health Aide	76 1,884	24.8		PERCENT DISCHARGES TO:	_
Physical Therapy	260 1,853	7.1		Private Residences	76.2%
Spch/Occ/Resp Therapy		3.8		General Hospitals	1.9
Medical Social Service	e 103 159 0 0	1.5 0.0		Nursing Homes Deaths	9.2 1.7
Private Duty Nursing Personal Care/PC RN Su		0.0		Other	11.1
Other Home Health Care		0.0		Ochei	11.1
Homemkr & Other Non H		0.0			
TOTAL	XXXXXXX 9,498	XXXXX			
	, ,				
AGE AND SEX OF PATIENTS	PATIENT REIMBURSE	MENT SOURCE			
Under 4 2.2%	Medicare	65.9%			
4 to 34 4.4	Medicaid _	9.8			
35 to 54 13.9	Other Federal	0.0		GEN ERTING	
55 to 64 13.1	State Funds	0.0		STAFFING	FTES
65 to 74 11.5 75 to 84 27.3	Private Insuran	ice 22.9 1.4		Administrators	0.5 1.0
75 to 84 27.3 85 & over 27.6	Self Pay Other	0.0		Reg. Nurse Supervisors Registered Nurses	7.8
05 & OVEL 27.0	TOTAL PATIENTS	590		Licensed Practical Nurses	0.0
Males 42.5% Females	57.5 %	330		Home Health Aides	2.4
110.100 12.00 10010	37.3			Physical Therapists	1.8
PI	RIMARY DIAGNOSIS		REVENUE	Occupational Therapists	0.3
Infectious Disorders	0.5% Digestive Disord	lers 1.2%	Billings \$ 1,414,		0.3
Cancer	7.6 Genitourinary Sy		Disallowances 189,		0.0
Diabetes	1.5 Preg. & Childbir		Collections 1,225,		0.3
Diseases of Blood	0.3 Arthropathies	2.2	Other	0 Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.3 Osteopathies	1.0	Total 1,225,		0.0
Psychoses/Neuroses	0.0 Perinatal Period 1.4 Ill-Defined Cond		EXPENSES	Homemakers Other Staff	0.0 5.8
Central Nervous Sys. Paralysis/CP	0.3 Fractures	1. 2.4			20.2
Cardiovascular	9.7 Wounds, Burns	1.2	Total \$ 1,841,	OII TOTAL FIED	20.2
Stroke	1.7 Compl. of Surger				
Respiratory	8.0 Other Conditions				
<u>-</u> <u>-</u> <u>-</u> <u>-</u> <u>-</u>					

Clark Neillsville WI 54456 Clark County Eau Claire

(715) 743-8449

13) /43-0449			
License Number: 146 Ownership of Agency: No	opprofit Drivate	TOTAL NUMBER OF ADMISSIONS 2	8
Title 18 (Medicare) cer Title 19 (Medicaid) cer Department of a hospita Number of unduplicated	ctified? Yes ctified? Yes al? Yes	PERCENT ADMISSIONS FROM: Private Residences 42.9 General Hospitals 46.4 Nursing Homes 10.7 Other 0.0	
	NO. OF NO. OF VISITS PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT	(Including Deaths) 33	3
Skilled Nursing	43 706 16.4		
Home Health Aide	18 711 39.5	PERCENT DISCHARGES TO:	
Physical Therapy	1 14 14.0	Private Residences 69.7	
Spch/Occ/Resp Therapy		General Hospitals 3.0	
Medical Social Servic		Nursing Homes 27.3	
Private Duty Nursing	0 0.0	Deaths 0.0	
Personal Care/PC RN S Other Home Health Car		Other 0.0	
Homemkr & Other Non H			
TOTAL	XXXXXXX 1,431 XXXXX		
	_,		
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE		
Under 4 0.0%	Medicare 93.2%		
4 to 34 0.0	Medicaid 2.3		
35 to 54 4.7	Other Federal 0.0		
55 to 64 0.0	State Funds 0.0	STAFFING FTES	
65 to 74 16.3	Private Insurance 2.3	Administrators 1.0	
75 to 84 20.9 85 & over 58.1	Self Pay 2.3 Other 0.0	Reg. Nurse Supervisors 1.0 Registered Nurses 0.3	
65 & OVEL 56.1	TOTAL PATIENTS 44	Registered Nurses 0.3 Licensed Practical Nurses 0.0	
Males 41.9% Females		Home Health Aides 0.7	
rates 41.50 remares	30.1 0	Physical Therapists 0.0	
P	PRIMARY DIAGNOSIS	REVENUE Occupational Therapists 0.0	
Infectious Disorders	0.0% Digestive Disorders 2.3%	Billings \$ 120,054 Speech Pathologists 0.0	
Cancer	4.7 Genitourinary Sys. 2.3	Disallowances -30,352 Respiratory Therapists 0.0	
Diabetes	11.6 Preg. & Childbirth 0.0	Collections 150,406 Medical Social Workers 0.0	
Diseases of Blood	7.0 Arthropathies 7.0	Other 0 Other Therapeutic Staff 0.0	
Dementia/Alzheimers	0.0 Osteopathies 0.0	Total 150,406 Personal Care Workers 0.0	
Psychoses/Neuroses	0.0 Perinatal Period 0.0	Homemakers 0.0	
Central Nervous Sys.	0.0 Ill-Defined Cond. 0.0	EXPENSES Other Staff 0.1	
Paralysis/CP Cardiovascular	2.3 Fractures 4.7 30.2 Wounds, Burns 16.3	Total \$ 182,164 TOTAL FTES 3.1	
Stroke	30.2 Wounds, Burns 16.3 0.0 Compl. of Surgery 4.7		
Respiratory	7.0 Other Conditions 0.0		
певричесту	7.0 Celler collections 0.0		

Divine Savior Home Care 2817 New Pinery Road, PO Box Portage WI 53901	387 Columbia	a County		COUNTIES Adams Columb				
(608) 745-6400 License Number: 328 Ownership of Agency: Non	profit Churc	rh		Green Marque Sauk	ette	:	FOTAL NUMBER OF ADMISSIONS	269
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	ified? Ye ified? Ye? Ye	es es es	290			1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	16.7% 67.3 15.6 0.4
SERVICES PROVIDED	NO. OF PATIENTS	VISITS	VISITS PER PATIENT			:	TOTAL NUMBER OF DISCHARGES (Including Deaths)	302
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	pv. 0 0 0	2,150 442 1,181 942 3 0 0 0 0 4,718	7.4 7.1 5.0 4.1 1.0 0.0 0.0 0.0 0.0 XXXXX			1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	80.1% 3.0 3.0 2.3 11.6
AGE AND SEX OF PATIENTS	PATIENT	reimburs	EMENT SOURCE					
Under 4 0.0% 4 to 34 1.0 35 to 54 6.6 55 to 64 14.1 65 to 74 18.6 75 to 84 30.0 85 & over 29.7 Males 36.2% Females	State Priva Self Other TOTAL	caid Federal Funds ate Insura Pay	0.0			S	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides	FTES 1.0 0.0 3.1 1.0
					D-11111111		Physical Therapists	1.0
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	2.8 Preg. 1.4 Arthro 0.0 Osteop 0.3 Perina 0.0 Ill-De 0.0 Fractu 8.3 Wounds 5.2 Compl.	cive Disor Durinary S & Childbi Dpathies Dathies Atal Perio	ys. 3.8 rth 0.0 4.5 1.0 od 0.7 rd. 6.6 1.4 0.7	Billing Disallo Collect Other Total	wances	656,397 46,278 610,119 1,174 611,293	Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	1.0 0.1 0.0 0.1 0.5 0.0 0.0 0.5 9.4

Prairie du Chien Memorial Hospital Home Health Care COUNTIES SERVED 705 East Taylor Street Crawford Prairie du Chien WI 53821 Crawford County Grant Iowa (608) 357-2262 Richland License Number: 46 TOTAL NUMBER OF ADMISSIONS 276 Ownership of Agency: Nonprofit Corporation Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 23.2% Department of a hospital? Yes General Hospitals 71.7 Number of unduplicated patients in 2004 = 272 Nursing Homes 5.1 Other 0.0 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES SERVICES PROVIDED PATIENTS VISITS PATIENT (Including Deaths) 274 Skilled Nursing 269 3,709 13.8 Home Health Aide 90 1,099 12.2 PERCENT DISCHARGES TO: Physical Therapy 72 377 5.2 Private Residences 74.8% Spch/Occ/Resp Therapy 402 General Hospitals 10.9 57 7.1 Medical Social Service 10 23 2.3 Nursing Homes 6.6 Private Duty Nursing 0 Ω 0.0 Deaths 2.6 Personal Care/PC RN Supv. 0 0.0 Other 5.1 0 Other Home Health Care Ω 0 0.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 5,610 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 6.6% Medicare 78.0% 4 to 34 1.8 Medicaid 9.0 35 to 54 Other Federal 6.6 0.0 55 to 64 STAFFING FTES 8.8 State Funds 0.0 65 to 74 16.5 Private Insurance 11.2 Administrators 0.1 75 to 84 Req. Nurse Supervisors 33.5 Self Pav 0.0 2..085 & over 26.1 1.8 Registered Nurses Other 6.7 TOTAL PATIENTS Licensed Practical Nurses 0.0 277 Males 42.6% Females 57.4 % Home Health Aides 2.1 Physical Therapists 0.3 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.0 Infectious Disorders 0.0% Digestive Disorders Speech Pathologists 2.2% Billings 775,455 0.0 Cancer 4.0 Genitourinary Sys. 2.9 Disallowances 102,821 Respiratory Therapists 0.0 Diabetes 6.3 Preq. & Childbirth 0.0 Collections 672,634 Medical Social Workers 0.1 1.1 Arthropathies Diseases of Blood Other Therapeutic Staff 9.6 Other 0.0 Dementia/Alzheimers 0.0 Osteopathies 1.5 Total 672,634 Personal Care Workers 0.0 0.4 Perinatal Period Psvchoses/Neuroses 6.3 Homemakers 0.0 Central Nervous Sys. 1.1 Ill-Defined Cond. EXPENSES Other Staff 7.4 2.6 Paralysis/CP 0.4 Fractures 7.0 Total 942,906 TOTAL FTES 13.9

1.8

4.8

7.4

Cardiovascular

Respiratory

Stroke

22.4 Wounds, Burns

4.4 Compl. of Surgery

9.2 Other Conditions

Page 18 Catalyst, Inc. 222 North Midvale Boulevard, Suite 8 COUNTIES SERVED Dane

Madison WI 53705 Dane County

(608) 238-8119

	08) 238-8119							
Affiliated with a hospital? No Number of unduplicated patients in 2004 = 29	Ownership of Agency: Pro Title 18 (Medicare) cert	ified?	Yes	1			PERCENT ADMISSIONS FROM:	
Number of unduplicated patients in 2004 = 29	,							
No. OF No. OF No. OF VISITS PER SERVICES PROVIDED PATIENTS VISITS PATIENT VISITS PATIENT VISITS PATIENT VISITS PATIENT VISITS PATIENT VISITS PATIENT VISITS VISITS VISITS PATIENT VISITS				0.0			-	
NO. OF NO. OF NO. OF VISITS PER SERVICES PROVIDED PATIENTS VISITS PATIENT (Including Deaths) 3	Number of unduplicated p	atients in	2004 =	29			5	
SERVICES PROVIDED							other	0.0
Home Health Aide		PATIENTS	VISITS	PATIENT		į		3
Physical Therapy	9						DEDCENT DICCURDES TO.	
Spch/Occ/Resp Therapy		-	-					100 09
Medical Social Service 0 0 0.0 Deaths 0.0 Private Duty Nursing 0 0 0.0 Deaths 0.0 Personal Care/PC RN Supv. 58 6,299 108.6 Other 0.0 Other Home Health Care 0 0 0.0 Other Other Homemakr & Other Non HH 0 0 0.0 Other Other Under 4 3.4% Medicare 0.0% Other Administrators 100.0 35 to 54 0.0 Other Federal 0.0 Staffing FTES 65 to 74 0.0 Staff Pay 0.0 Reg. Nurse Supervisors 0.2 95 & over 0.0 Other 0.0 Registered Nurses 0.1 Males 58.6% Females 41.4% Females 41.4 Females 41.4 <t< td=""><td>1 11</td><td>~</td><td>-</td><td></td><td></td><td></td><td></td><td></td></t<>	1 11	~	-					
Private Duty Nursing								
Personal Care/PC RN Supv. 58 6,299 108.6 Other Home Health Care O 0 0 0.0			-				3	
Other Home Health Care Homemkr & Other Non HH			6,299					
### AGE AND SEX OF PATIENTS Under 4 3.4% Medicare 0.0%			•	0.0				
Mage And Sex OF PATIENTS Data Reimbursement Source Under 4 3.4% Medicare 0.0% At 10.34 96.6 Medicaid 100.0 State Funds 0.0 Reg. Nurse Supervisors 0.2 Reg. Supervisors 0.0 Reg. Supervisors 0.0 Reg. Supervisors 0.0 State Funds 0.0	Homemkr & Other Non HH	Ι 0	0	0.0				
Under 4	TOTAL	XXXXXXX	6,300	XXXXX				
Under 4	AGE AND SEY OF DATTENTS	סאייד	יאי ספדאפוונ	CEMENT COIDCE				
4 to 34								
35 to 54								
State Funds								
Reg. Nurse Supervisors 0.2 Registered Nurses 0.1 Registered Nurses 0.1 Registered Nurses 0.1 Licensed Practical Nurses 0.0 Licensed Practical Nurses 0.0 Licensed Practical Nurses 0.0 Registered Nurses 0.0 Licensed Practical Nurses 0.0 Coupational Therapists 0.0 Licensed Practical Nurses 0.0 Licensed							STAFFING	FTES
85 & over 0.0 Other 0.0 Other 0.0 Registered Nurses 0.1 Licensed Practical Nurses 0.0 Home Health Aides 0.0 Home Health Aides 0.0 Physical Therapists 0.0 Occupational Therapists 0.0 Diabletes 0.0 Preg. & Childbirth 0.0 Collections 557,833 Medical Social Workers 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Homemakers 0.0 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total 539,054 TOTAL FTES 16.3 Stroke 0.0 Compl. of Surgery 0.0	65 to 74 0.0	Pri	vate Insur	cance 0.0			Administrators	1.0
Males 58.6% Females 41.4 % Licensed Practical Nurses 0.0 PRIMARY DIAGNOSIS REVENUE Dispression Dispressio	75 to 84 0.0	Sel	f Pay	0.0			Reg. Nurse Supervisors	0.2
Males 58.6% Females 41.4 % PRIMARY DIAGNOSIS Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 602,189 Speech Pathologists 0.0 Occupational Therapists 0.0 Occupational Therapists 0.0 Disabletes 0.0 Preg. & Childbirth 0.0 Collections 557,833 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Homemakers 0.0 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Stroke 0.0 Compl. of Surgery 0.0	85 & over 0.0							
PRIMARY DIAGNOSIS REVENUE Occupational Therapists O.0 Infectious Disorders O.0 Infectious Disorders O.0 Diseases of Blood Diseases of Blood Dementia/Alzheimers O.0 Central Nervous Sys. Central Nervous Sys. Cardiovascular O.0 EXPENSES Cardiovascular O.0 REVENUE Occupational Therapists O.0 Disallowances 44,356 Respiratory Therapists O.0 Collections 557,833 Medical Social Workers O.0 Other Other Therapeutic Staff O.0 Contral S57,833 Personal Care Workers Homemakers O.0 Central S41 Fractures O.0 Total Fractures Other Staff Other Sta			'AL PATIENT	TS 29				
Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 602,189 Speech Pathologists 0.0 Cancer 0.0 Genitourinary Sys. 0.0 Disallowances 44,356 Respiratory Therapists 0.0 Diabetes 0.0 Preg. & Childbirth 0.0 Collections 557,833 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0	Males 58.6% Females	41.4 %						
Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 602,189 Speech Pathologists 0.0 Cancer 0.0 Genitourinary Sys. 0.0 Disallowances 44,356 Respiratory Therapists 0.0 Diabetes 0.0 Preg. & Childbirth 0.0 Collections 557,833 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0	D.	TW1 DW DT10	NO G T G		D. 1111111111			
Cancer 0.0 Genitourinary Sys. 0.0 Disallowances 44,356 Respiratory Therapists 0.0 Diabetes 0.0 Preg. & Childbirth 0.0 Collections 557,833 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0						600 100		
Diabetes 0.0 Preg. & Childbirth 0.0 Collections 557,833 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Homemakers 0.0 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0						•		
Diseases of Blood 0.0 Arthropathies 0.0 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Homemakers 0.0 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0								
Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 557,833 Personal Care Workers 14.1 Psychoses/Neuroses 37.9 Perinatal Period 3.4 Homemakers 0.0 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0								
Psychoses/Neuroses 37.9 Perinatal Period 3.4 Homemakers 0.0 Central Nervous Sys. 10.3 Ill-Defined Cond. 6.9 EXPENSES Other Staff 1.0 Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0						-	-	
Central Nervous Sys. 10.3Ill-Defined Cond.6.9EXPENSESOther Staff1.0Paralysis/CP17.2Fractures0.0Total\$ 539,054TOTAL FTES16.3Cardiovascular0.0Wounds, Burns0.0Stroke0.0Compl. of Surgery0.0						,		
Paralysis/CP 17.2 Fractures 0.0 Total \$ 539,054 TOTAL FTES 16.3 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0					EXPENSES		Other Staff	
Stroke 0.0 Compl. of Surgery 0.0	Paralysis/CP				Total \$	539,054	TOTAL FTES	16.3
· • • • • • • • • • • • • • • • • • • •	Cardiovascular							
Respiratory 0.0 Other Conditions 24.1								
	Respiratory	0.0 Othe	r Conditio	ons 24.1				

Home Health United VNS 4801 Hayes Road Madison WI 53704	Dane County		COUNTIES SERVED Adams Columbia Dane		
(608) 242-1516 License Number: 176			Dodge Grant Green	TOTAL NUMBER OF ADMISSIONS	3,678
Ownership of Agency: Non Title 18 (Medicare) cert			Green Green Lake Iowa	PERCENT ADMISSIONS FROM:	3,6/8
Title 19 (Medicaid) cert Affiliated with a hospit	cified? Yes		Jefferson Juneau	Private Residences General Hospitals	0.2% 83.5
Number of unduplicated p	patients in 2004 =	3,706	Marquette Monroe Richland	Nursing Homes Other	15.4
SERVICES PROVIDED	NO. OF NO. OF PATIENTS VISITS		Rock Sauk	TOTAL NUMBER OF DISCHARGES (Including Deaths)	3,613
Skilled Nursing Home Health Aide Physical Therapy	3,641 43,783 926 24,257 2,290 17,335	12.0 26.2 7.6	Vernon Walworth	PERCENT DISCHARGES TO: Private Residences	75.0%
Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing	949 6,578 722 1,996	6.9 2.8 0.0		General Hospitals Nursing Homes Deaths	6.7 3.7 2.0
Personal Care/PC RN Su Other Home Health Care	apv. 4 1,558	389.5		Other	12.6
Homemkr & Other Non HH TOTAL	4 0 0 XXXXXXX 95,507	0.0 XXXXX			
AGE AND SEX OF PATIENTS		JRSEMENT SOURCE			
Under 4 0.9%	Medicare	74.5%			
4 to 34 4.8	Medicaid	3.0			
35 to 54 10.3 55 to 64 10.9	Other Federa State Funds	0.0 0.0		STAFFING	FTES
55 to 64 10.9 65 to 74 18.2	Private Insu			Administrators	6.0
75 to 84 31.2	Self Pay	0.8		Req. Nurse Supervisors	8.0
85 & over 23.7	Other	0.0		Registered Nurses	69.1
05 & OVCI 25.7	TOTAL PATIEN			Licensed Practical Nurses	1.9
Males 40.2% Females		3,737		Home Health Aides	23.9
rates 10.20 remates	33.0 0			Physical Therapists	14.5
PF	RIMARY DIAGNOSIS		REVENUE	Occupational Therapists	6.2
Infectious Disorders	0.9% Digestive Dis	sorders 2.0%	Billings \$ 11,120,17	<u>-</u>	0.7
Cancer	3.2 Genitourinary		Disallowances 935,061	1	11.0
Diabetes	4.5 Preg. & Child	dbirth 0.1	Collections 10,185,116	Medical Social Workers	7.1
Diseases of Blood	0.8 Arthropathies	6.3	Other 456,200	Other Therapeutic Staff	0.6
Dementia/Alzheimers	0.6 Osteopathies	1.0	Total 10,641,322	Personal Care Workers	0.0
Psychoses/Neuroses	0.4 Perinatal Per	riod 0.3		Homemakers	9.2
Central Nervous Sys.	1.5 Ill-Defined (EXPENSES	Other Staff	49.9
Paralysis/CP	0.4 Fractures	1.8	Total \$ 10,956,761	l TOTAL FTES	207.9
Cardiovascular	10.8 Wounds, Burns				
Stroke	1.5 Compl. of Sur				
Respiratory	4.4 Other Conditi	ons 51.2			

Independent Health Care 815 Forward Drive

Madison Wi 53711 Dane County

(608) 274-2097

Title 18 Medicare certified? Yes	License Number: 294 Ownership of Agency: Pr	oprietary Corporation	n			TOTAL NUMBER OF ADMISSIONS	90
Services PROVIDED SATIENTS SATIENTS SATIENTS SATIENTS Skilled Nursing 82 443 5.4 Home Health Aide 27 305 11.3	Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi	tified? Yes tified? Yes tal? No			•	Private Residences General Hospitals Nursing Homes	26.7 47.8
Home Health Aide 27 305 11.3 PRICENT DISCRARGES TO:		PATIENTS VISITS	PATIENT		•		90
Physical Therapy	9					DEDCENT DICCURDES TO.	
Spch/Occ/Resp Therapy					•		20 NS
Medical Social Service 0 0 0.0 Deaths 8.9 Private Duty Nursing 0 0 0.0 Other 0.0 0.0 Personal Care/PC RN Supv. 0 0 0.0 Other 0.0 0.0 Other Home Health Care 0 0 0.0 0.0 0.0 0.0 0.0 TOTAL XXXXXXX 1,812 XXXXXX XXXXXXX 0.0							
Private Duty Nursing							
Personal Care/PC RN Supv. 0 0 0 0.0 Other Home Health Care O 0 0 0.0 Other Home Health Care O 0 0 0.0 Other Homemkr & Other Non HH TOTAL XXXXXXX						3	
Other Home Health Care Homemkr & Other Non HH		-					
### AGE AND SEX OF PATIENTS Under 4 0.0% Medicare 96.9% 4 to 34 1.1 Medicaid 0.0 35 to 54 2.3 Other Federal 0.0 Staffing FTES 65 to 64 1.1 State Funds 0.0 Self Pay 0.0 85 & over 37.5 Other 0.0 Self Pay 0.0 85 & over 37.5 Other 0.0 Self Pay 0.0 85 & over 37.5 Other 0.0 Self Pay 0.0 86							
Mage and Sex of Patients Medicare 96.9%	Homemkr & Other Non H	Н 0 0	0.0				
Under 4	TOTAL	XXXXXXX 1,812	XXXXX				
State Funds	Under 4 0.0%	Medicare	96.9%				
Administrators 0.8 20.0	35 to 54 2.3	Other Federa	0.0				
Reg. Nurse Supervisors 0.0 Registered Nurses 1.0	55 to 64 1.1	State Funds	0.0		1	STAFFING	FTES
85 & over 37.5 Other 0.0 TOTAL PATIENTS 97 Males 33.0% Females 67.0 % Home Health Aides 0.3 Physical Therapists 0.4 Home Health Aides 0.3 Physical Therapists 0.4 Occupational Therapists 0.2 Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 298,000 Speech Pathologists 0.0 Cancer 1.1 Genitourinary Sys. 3.4 Disallowances 0 Respiratory Therapists 0.0 Diabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Expenses 0.0 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 Expenses 0.0 Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0	65 to 74 12.5	Private Insu:	rance 3.1			Administrators	0.8
Males 33.0% Females 67.0 % Home Health Aides 0.3 PRIMARY DIAGNOSIS Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 298,000 Speech Pathologists 0.2 Cancer 1.1 Genitourinary Sys. 3.4 Disallowances 0 Respiratory Therapists 0.0 Diabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0		<u> </u>					
Males 33.0% Females 67.0 % PRIMARY DIAGNOSIS Infectious Disorders 0.0% Diagestive Disorders 0.0% Billings \$ 298,000 Speech Pathologists 0.0 Cancer 1.1 Genitourinary Sys. 3.4 Disallowances 0 Respiratory Therapists 0.0 Diabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 EXPENSES 0.0 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0	85 & over 37.5						
PRIMARY DIAGNOSIS REVENUE Occupational Therapists 1.1 Genitourinary Sys. 3.4 Disallowances Diabetes Diseases of Blood Diseases of Blood Osteopathies Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 Paralysis/CP Daralysis/CP Cardiovascular 1.1 Wounds, Burns Occupational Therapists Occ			TS 97				
PRIMARY DIAGNOSIS Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 298,000 Speech Pathologists 0.0 Cancer 1.1 Genitourinary Sys. 3.4 Disallowances 0 Respiratory Therapists 0.0 Diabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0	Males 33.0% Females	67.0 %					
Infectious Disorders 0.0% Digestive Disorders 0.0% Billings \$ 298,000 Speech Pathologists 0.0 Cancer 1.1 Genitourinary Sys. 3.4 Disallowances 0 Respiratory Therapists 0.0 Diabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0	7.	DIVIDU DILAWOATA		D			
Cancer 1.1 Genitourinary Sys. 3.4 Disallowances 0 Respiratory Therapists 0.0 Disabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0			ordora 0 0%		200 000		
Diabetes 2.3 Preg. & Childbirth 0.0 Collections 298,000 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Homemakers 0.0 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0							
Diseases of Blood 0.0 Arthropathies 4.5 Other 23 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Homemakers 0.0 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0					•		
Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 298,023 Personal Care Workers 0.0 Psychoses/Neuroses 0.0 Perinatal Period 1.1 Homemakers 0.0 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0							
Psychoses/Neuroses 0.0 Perinatal Period 1.1 Homemakers 0.0 Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0							
Central Nervous Sys. 2.3 Ill-Defined Cond. 14.8 EXPENSES Other Staff 1.9 Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0	•			10001	250,020		
Paralysis/CP 0.0 Fractures 6.8 Total \$ 359,187 TOTAL FTES 4.5 Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0				EXPENSES			
Cardiovascular 11.4 Wounds, Burns 0.0 Stroke 5.7 Compl. of Surgery 0.0	-			Total \$	359,187		
· • • • • • • • • • • • • • • • • • • •	Cardiovascular	11.4 Wounds, Burns	0.0	·	-		
Respiratory 1.1 Other Conditions 45.5	Stroke						
	Respiratory	1.1 Other Condition	ons 45.5				

COUNTIES SERVED Dane

Interim Healthcare of Madison

COUNTIES SERVED

702 North Blackhawk Avenue, Suite 215

Madison WI 53705 Dane County Dane Rock

(608) 238-0268

08) 238-0268							
License Number: 206 Ownership of Agency: Pro	oprietary Corr	ooration			•	TOTAL NUMBER OF ADMISSIONS	120
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? No cified? No cal? No		194			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	60.8% 29.2 8.3 1.7
			ISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS V	/ISITS	PATIENT			(Including Deaths)	105
Skilled Nursing	5	187	37.4				
Home Health Aide	109	4,499	41.3		:	PERCENT DISCHARGES TO:	
Physical Therapy	2	28	14.0			Private Residences	46.7%
Spch/Occ/Resp Therapy	0	0	0.0			General Hospitals	2.9
Medical Social Service		0	0.0			Nursing Homes	11.4
Private Duty Nursing	0	0	0.0			Deaths	10.5
Personal Care/PC RN Su	-	13,283	103.8			Other	28.6
Other Home Health Care		0	0.0				
Homemkr & Other Non HF		6,385	354.7 XXXXX				
TOTAL	XXXXXXX 2	24,382	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT	REIMBURSE	MENT SOURCE				
Under 4 0.0%	Medica		0.0%				
4 to 34 9.3	Medica	aid	30.5				
35 to 54 11.9		Federal	0.0				
55 to 64 9.8	State	Funds	0.0			STAFFING	FTES
65 to 74 11.3	Privat	e Insuran	ice 4.3			Administrators	1.0
75 to 84 27.8	Self I	Pay	51.0			Reg. Nurse Supervisors	1.0
85 & over 29.9	Other		14.3			Registered Nurses	0.4
	TOTAL	PATIENTS	210			Licensed Practical Nurses	1.0
Males 43.3% Females	56.7 %					Home Health Aides	21.6
						Physical Therapists	0.0
	RIMARY DIAGNOS			REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.5% Digesti			Billings \$	2,051,300	Speech Pathologists	0.0
Cancer	1.0 Genitou			Disallowances	132,165	Respiratory Therapists	0.0
Diabetes		& Childbir		Collections	1,919,135	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthrop		4.6	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	2.6 Osteopa		1.0	Total	1,919,135	Personal Care Workers	19.3
Psychoses/Neuroses Central Nervous Sys.	2.6 Perinat 3.6 Ill-Def	tal Period		EXPENSES		Homemakers Other Staff	12.5 5.0
Paralysis/CP	6.7 Fractu		0.5		1,727,976	TOTAL FTES	61.8
Cardiovascular	1.0 Wounds		2.6	ıocaı Ş	1,141,310	TOTAL FIED	01.0
Stroke		, Burns of Surger					
Respiratory		Conditions					
veshiracorà	T.O OCHEL (CONTRACTORIS	00.3				

Meriter Home Care Agency		COUNTIES SERVED			
2180 West Beltline Highway Madison WI 53713	Dane County	Columbia Dane			
(608) 327-3700	-	Green Iowa			
License Number: 222 Ownership of Agency: Pr	oprietary Corporation	Jefferson Rock Sauk	Т	COTAL NUMBER OF ADMISSIONS	1,588
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Yes tified? Yes tal? Yes		Р	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	22.6% 64.0 8.4 5.0
SERVICES PROVIDED	NO. OF NO. OF VISITS PATIENTS VISITS PATIEN	T	Т	COTAL NUMBER OF DISCHARGES (Including Deaths)	1,611
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Servic Private Duty Nursing Personal Care/PC RN S Other Home Health Car Homemkr & Other Non H TOTAL	e 186 220 1.2 0 0 0.0 upv. 0 0 0.0 e 0 0 0.0 H 0 0 0.0		Р	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	75.5% 2.1 4.2 2.6 15.6
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT S	OURCE			
Under 4 1.0%	Medicare	55.5%			
4 to 34 4.0	Medicaid	2.6			
35 to 54 15.2	Other Federal	0.0	_		
55 to 64 14.7	State Funds	0.0	S	STAFFING	FTES
65 to 74 16.6	Private Insurance	22.5		Administrators	0.0
75 to 84 28.7	Self Pay	18.6		Reg. Nurse Supervisors	2.0
85 & over 19.7	Other TOTAL PATIENTS 1	0.8		Registered Nurses Licensed Practical Nurses	18.8 0.9
Males 38.4% Females	61.6 %	.,937		Home Health Aides	4.8
Males 30.4% Females	01.0 %			Physical Therapists	8.6
P	RIMARY DIAGNOSIS	REVENUE		Occupational Therapists	2.2
Infectious Disorders	1.4% Digestive Disorders 4	.1% Billings \$	4,321,140	Speech Pathologists	0.0
Cancer	3	1.4 Disallowances	523,120	Respiratory Therapists	0.0
Diabetes	4.8 Preg. & Childbirth (.5 Collections	3,798,020	Medical Social Workers	0.7
Diseases of Blood	±	0.9 Other	129	Other Therapeutic Staff	0.0
Dementia/Alzheimers	±	4 Total	3,798,149	Personal Care Workers	0.0
Psychoses/Neuroses			_	Homemakers	0.0
Central Nervous Sys.		1 EXPENSES		Other Staff	6.0
Paralysis/CP			3,113,648	TOTAL FTES	44.0
Cardiovascular Stroke	•	9			
Respiratory	5 1	9 4			
Respiratory	J. J JUNET CONGILITIONS	• •			

University Hospital Home Hea	lth Agency	COUNTIES SERVED		
2030 Pinehurst Drive		Columbia		
Middleton WI 53562	Dane County	Dane		
(600) 202 2272	4	Dodge Green		
(608) 203-2273		Jefferson		
License Number: 252		Sauk	TOTAL NUMBER OF ADMISSIONS	1,064
Ownership of Agency: Sta	ite	baux	TOTAL NUMBER OF ADMISSIONS	1,004
Title 18 (Medicare) cert			PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert				22.4%
Department of a hospital				66.4
Number of unduplicated p			Nursing Homes	8.7
1	•		Other	2.4
	NO. OF NO. OF VISITS	PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIE		(Including Deaths)	1,080
Skilled Nursing	804 8,823 11.			
Home Health Aide	115 1,117 9.		PERCENT DISCHARGES TO:	
Physical Therapy	577 3,136 5.	_		84.2%
Spch/Occ/Resp Therapy	177 624 3.		General Hospitals	3.4
Medical Social Service			Nursing Homes	2.2
Private Duty Nursing	0 0 0.		Deaths	1.7
Personal Care/PC RN Su Other Home Health Care			Other	8.5
Homemkr & Other Non H				
TOTAL	XXXXXXX 13,863 XXXX			
TOTAL	AMAAAA 13,003 AMAA	Λ		
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT	SOURCE		
Under 4 2.0%	Medicare	54.5%		
4 to 34 8.0	Medicaid	6.5		
35 to 54 21.0	Other Federal	0.0		
55 to 64 17.5	State Funds	0.0	#	FTES
65 to 74 16.1	Private Insurance	35.4	Administrators	0.3
75 to 84 21.5	Self Pay	0.9	Reg. Nurse Supervisors	1.0
85 & over 13.8	Other	2.8		11.5
N 7 41 40 77 7		1,162	Licensed Practical Nurses	2.5
Males 41.4% Females	58.6 %		Home Health Aides	1.3
DE	IMARY DIAGNOSIS	REVENUE	Physical Therapists Occupational Therapists	4.0
Infectious Disorders			1,973,413 Speech Pathologists	0.3
Cancer	5	2.0 Disallowances	215,318 Respiratory Therapists	0.0
Diabetes	1 1 2	0.3 Collections	1,758,095 Medical Social Workers	0.5
Diseases of Blood	5	5.7 Other	0 Other Therapeutic Staff	0.0
Dementia/Alzheimers		1.0 Total	1,758,095 Personal Care Workers	0.0
Psychoses/Neuroses		0.5	Homemakers	0.0
Central Nervous Sys.		8.1 EXPENSES	Other Staff	3.8
Paralysis/CP	0.4 Fractures	0.5 Total \$	2,076,895 TOTAL FTES	25.6
Cardiovascular	7.0 Wounds, Burns	1.8		
Stroke	0.7 Compl. of Surgery	5.4		
Respiratory	4.1 Other Conditions 4	2.3		

Stoughton Hospital Home Health United COUNTIES SERVED 900 Ridge Street Dane Stoughton WI 53589 Dane County Green Jefferson (608) 873-2366 Rock License Number: 341 TOTAL NUMBER OF ADMISSIONS 547 Ownership of Agency: Nonprofit Association Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 2.4% Department of a hospital? Yes General Hospitals 74.0 Number of unduplicated patients in 2004 = 535 Nursing Homes 18.5 Other 5.1 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES VISITS SERVICES PROVIDED PATIENTS PATIENT (Including Deaths) 557 Skilled Nursing 518 6,787 13.1 Home Health Aide 137 2,652 19.4 PERCENT DISCHARGES TO: 7.5 Physical Therapy 355 2,657 Private Residences 73.4% Spch/Occ/Resp Therapy 128 681 5.3 General Hospitals 5.7 Medical Social Service 8.0 131 1.6 Nursing Homes 3.4 Private Duty Nursing 0 0 0.0 Deaths 1.1 Personal Care/PC RN Supv. 0 0.0 Other 16.3 0 Other Home Health Care Ω 0 0.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 12,908 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 0.0% Medicare 75.3% 4 to 34 3.4 Medicaid 1.8 35 to 54 Other Federal 9.5 0.0 55 to 64 STAFFING FTES 9.7 State Funds 0.0 65 to 74 17.9 Private Insurance 21.4 Administrators 1.0 75 to 84 Req. Nurse Supervisors 34.4 Self Pav 1.5 1.0 85 & over 25.0 Other Registered Nurses 7.1 0.0 TOTAL PATIENTS 547 Licensed Practical Nurses 0.0 Males 40.2% Females 59.8 % Home Health Aides 2.0 Physical Therapists 3.2 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.9 Infectious Disorders 0.6% Digestive Disorders 2.2% Speech Pathologists Billings \$ 1,540,265 0.0 Cancer 2.2 Genitourinary Sys. 1.9 Disallowances 170,037 Respiratory Therapists 0.0 Diabetes 3.0 Preq. & Childbirth 0.2 Collections 1,370,228 Medical Social Workers 0.9 2.8 Arthropathies Diseases of Blood Other Therapeutic Staff 5.0 Other 0.0 Dementia/Alzheimers 0.2 Osteopathies 0.6 Total 1,370,228 Personal Care Workers 0.0 0.2 Perinatal Period Psvchoses/Neuroses 0.0 Homemakers 0.0 Central Nervous Sys. 0.7 Ill-Defined Cond. EXPENSES Other Staff 9.5 0.8 Paralysis/CP 0.0 Fractures 0.7 Total \$ 1,252,686 TOTAL FTES 16.8

0.9

1.9

52.0

Cardiovascular

Respiratory

Stroke

9.0 Wounds, Burns

1.3 Compl. of Surgery

5.0 Other Conditions

Hillside Home Health 709 South University Avenue Beaver Dam WI 53916 (920) 887-4050 License Number: 188 Ownership of Agency: Nong Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit. Number of unduplicated pages	ified? Yes ified? Yes al? No	566	COUNTIES SERVED Columbia Dane Dodge Fond du Lac Green Jefferson TOTAL NUMBER OF ADMIS PERCENT ADMISSIONS FR Private Residences General Hospitals Nursing Homes Other	
SERVICES PROVIDED Skilled Nursing Home Health Aide	NO. OF NO. OF PATIENTS VISITS 540 4,957 175 1,939	PATIENT 9.2	TOTAL NUMBER OF DISCH (Including Deaths PERCENT DISCHARGES TO) 572
Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH TOTAL	209 978 48 176 13 33 0 0 pv. 0 0	4.7 3.7 2.5 0.0 0.0 0.0 0.0	Private Residences General Hospitals Nursing Homes Deaths Other	79.5% 3.3 4.7 2.4 10.0
AGE AND SEX OF PATIENTS Under 4 3.2% 4 to 34 1.8 35 to 54 6.9 55 to 64 7.4 65 to 74 18.0 75 to 84 35.3 85 & over 27.4 Males 43.3% Females	Medicare Medicaid Other Feder State Funds Private Ins Self Pay Other TOTAL PATIE	s 0.0 surance 14.6 0.4 0.0	STAFFING Administrators Reg. Nurse Supervis Registered Nurses Licensed Practical Home Health Aides	5.5 Nurses 0.0 1.7
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP	IMARY DIAGNOSIS 0.5% Digestive Di 7.4 Genitourinar 4.4 Preg. & Chil 1.2 Arthropathic 0.5 Osteopathics 0.4 Perinatal Pc 2.3 Ill-Defined 0.4 Fractures 16.8 Wounds, Burn 3.5 Compl. of Su 8.5 Other Condit	ry Sys. 7.2 dbirth 0.0 es 4.8 s 1.4 eriod 3.0 Cond. 5.3 3.4 as 0.4 argery 3.4	REVENUE Billings \$ 1,011,713 Speech Pathologists Disallowances -38,564 Respiratory Therapi Collections 1,050,277 Medical Social Work Other 2,627 Other Therapeutic S Total 1,052,904 Personal Care Worke Homemakers EXPENSES Total \$ 1,101,130 TOTAL FTES	ists 0.0 0.0 sts 0.0 ers 0.1 taff 0.0

Marquardt Memorial Manor 1020 Hill Street COUNTIES SERVED Dodge Jefferson Watertown WI 53098 Dodge County

(920) 261-7108

20) 261-7108							
License Number: 134 Ownership of Agency: No	nrofit Cor	noration			•	TOTAL NUMBER OF ADMISSIONS	142
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? cified? cal?	Yes Yes No	162		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	57.0% 31.7 7.7 3.5
	NO. OF	NO. OF	VISITS PER		•	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	176
Skilled Nursing	162	1,890	11.7		_		
Home Health Aide	99	1,615	16.3]	PERCENT DISCHARGES TO:	
Physical Therapy	56	523	9.3			Private Residences	63.6%
Spch/Occ/Resp Therapy		145 273	4.7			General Hospitals	5.7 8.5
Medical Social Service	e 27 0	2 / 3 0	10.1			Nursing Homes Deaths	8.5 4.5
Private Duty Nursing Personal Care/PC RN Su	-	1,518	116.8			Other	4.5 17.6
Other Home Health Care		1,510	0.0			Other	17.0
Homemkr & Other Non H		0	0.0				
TOTAL	XXXXXXX	5,964	XXXXX				
		•					
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	SEMENT SOURCE				
Under 4 0.0%		icare	73.5%				
4 to 34 0.6		icaid	4.9				
35 to 54 3.1		er Federal					
55 to 64 7.4		te Funds	0.0		:	STAFFING	FTES
65 to 74 13.6		vate Insur				Administrators	1.0
75 to 84 30.2		f Pay	18.5			Reg. Nurse Supervisors	0.0
85 & over 45.1	Oth		0.0			Registered Nurses	2.0
Males 29.0% Females	71.0 %	AL PATIENT	'S 162			Licensed Practical Nurses Home Health Aides	0.0 1.5
Males 29.0% Females	/1.0 6					Physical Therapists	0.0
ום	RIMARY DIAG	NOSTS		REVENUE		Occupational Therapists	0.0
Infectious Disorders		stive Disc	orders 0.6%	Billings \$	466,700	Speech Pathologists	0.0
Cancer		tourinary		Disallowances	57,741	Respiratory Therapists	0.0
Diabetes	22.2 Preq		2	Collections	408,959	Medical Social Workers	0.2
Diseases of Blood	1.2 Arth:		13.6	Other	38,532	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Oste		1.2	Total	447,491	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri	.od 0.0		•	Homemakers	0.0
Central Nervous Sys.	3.7 Ill-1	Defined Co	ond. 8.0	EXPENSES		Other Staff	0.8
Paralysis/CP	0.0 Frac	tures	2.5	Total \$	394,818	TOTAL FTES	5.4
Cardiovascular	14.2 Wound		0.6				
Stroke		1. of Surg					
Respiratory	2.5 Othe	r Conditic	ons 11.7				

125 Hospital Drive Watertown WI 53098	Dodge County		Dodge Jackson Waukesha			
(920) 262-4262						
License Number: 165 Ownership of Agency: No.	unprofit Corporation				TOTAL NUMBER OF ADMISSIONS	295
Title 18 (Medicare) cer					PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cer					Private Residences	5.8%
Department of a hospita	1? Yes				General Hospitals	68.8
Number of unduplicated	patients in 2004 = 30	15			Nursing Homes	7.1
					Other	18.3
SERVICES PROVIDED		TS PER			TOTAL NUMBER OF DISCHARGES (Including Deaths)	294
Skilled Nursing	274 1,393	5.1			(Including Deating)	274
Home Health Aide	,	.3.3			PERCENT DISCHARGES TO:	
Physical Therapy		8.9			Private Residences	91.5%
Spch/Occ/Resp Therapy		2.9			General Hospitals	1.0
Medical Social Service		1.3			Nursing Homes	4.1
Private Duty Nursing	2 4	2.0			Deaths	2.0
Personal Care/PC RN S	Supv. 74 3,500 4	7.3			Other	1.4
Other Home Health Car		0.0				
Homemkr & Other Non H		19.5				
TOTAL	XXXXXXX 7,488 XX	XXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMEN	T SOURCE				
Under 4 7.9%	Medicare	51.9%				
4 to 34 9.2	Medicaid	10.3				
35 to 54 14.4	Other Federal	0.0				
55 to 64 10.2	State Funds	0.0			STAFFING	FTES
65 to 74 19.3	Private Insurance	29.8			Administrators	1.0
75 to 84 25.6	Self Pay	6.4			Reg. Nurse Supervisors	0.0
85 & over 13.4	Other	1.6			Registered Nurses	2.0
Males 40.0% Females	TOTAL PATIENTS	312			Licensed Practical Nurses Home Health Aides	0.0 0.9
Males 40.0% remales	00.0 %				Physical Therapists	1.0
P	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.7% Digestive Disorders	0.0%	Billings \$	687,484	Speech Pathologists	0.1
Cancer	1.0 Genitourinary Sys.	0.3	Disallowances	59,309	Respiratory Therapists	0.0
Diabetes	2.6 Preg. & Childbirth	0.0	Collections	628,175	Medical Social Workers	0.0
Diseases of Blood	0.7 Arthropathies	0.7	Other	547	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies	0.3	Total	628,722	Personal Care Workers	3.1
Psychoses/Neuroses	0.3 Perinatal Period	6.9			Homemakers	1.7
Central Nervous Sys.	0.3 Ill-Defined Cond.	5.6	EXPENSES	767 250	Other Staff	1.0
Paralysis/CP Cardiovascular	0.7 Fractures	1.3	Total \$	767,358	TOTAL FTES	10.8
Cardiovascular Stroke	8.5 Wounds, Burns 0.0 Compl. of Surgery	0.7 1.0				
Respiratory	4.9 Other Conditions	63.6				
respiratory	4.5 Other Conditions	03.0				

COUNTIES SERVED

Watertown Memorial Hospital Home Health Program

Door County Memorial Home Health 1300 Egg Harbor Road, #110 Sturgeon Bay WI 54235

Door County

COUNTIES SERVED Door Kewaunee

19201 143-190	(920)	743-	7983
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20, 713 7303				
License Number: 187 Ownership of Agency: Nor	nprofit Church/Corpo	ration	TOTAL NUMBER OF ADMISSIONS	290
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	tified? Yes tified? Yes tal? No	288	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	1.4% 59.3 8.6 30.7
	NO. OF NO. OF	VISITS PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT	(Including Deaths)	290
Skilled Nursing	254 3,942	15.5	, J	
Home Health Aide	80 1,893	23.7	PERCENT DISCHARGES TO:	
Physical Therapy	134 794	5.9	Private Residences	68.3%
Spch/Occ/Resp Therapy	91 396	4.4	General Hospitals	4.1
Medical Social Service	e 0 0	0.0	Nursing Homes	9.3
Private Duty Nursing	7 21	3.0	Deaths	3.4
Personal Care/PC RN Su		38.2	Other	14.8
Other Home Health Care		0.0		
Homemkr & Other Non H		0.0		
TOTAL	XXXXXXX 8,534	XXXXX		
AGE AND SEX OF PATIENTS	PATIENT REIMBU	PSEMENT SOUDCE		
Under 4 0.0%	Medicare	83.2%		
4 to 34 1.4	Medicaid	7.4		
35 to 54 4.2	Other Federa			
55 to 64 5.9	State Funds	0.0	STAFFING	FTES
65 to 74 16.3	Private Insu	rance 6.7	Administrators	0.5
75 to 84 45.5	Self Pay	2.4	Req. Nurse Supervisors	1.0
85 & over 26.7	Other	0.3	Registered Nurses	4.0
	TOTAL PATIEN	TS 297	Licensed Practical Nurse	s 0.0
Males 39.2% Females	60.8 %		Home Health Aides	1.6
			Physical Therapists	0.5
	RIMARY DIAGNOSIS		REVENUE Occupational Therapists	0.2
Infectious Disorders	5		Billings \$ 1,142,655 Speech Pathologists	0.0
Cancer	1.4 Genitourinary		Disallowances 351,778 Respiratory Therapists	0.0
Diabetes	3.1 Preg. & Child		Collections 790,877 Medical Social Workers	0.0
Diseases of Blood	2.1 Arthropathies	5.6 1.4	Other 1,577 Other Therapeutic Staff Total 792,454 Personal Care Workers	0.0 1.3
Dementia/Alzheimers Psychoses/Neuroses	1.0 Osteopathies 2.4 Perinatal Per		Total 792,454 Personal Care Workers Homemakers	0.0
Central Nervous Sys.	1.4 Ill-Defined C		EXPENSES Other Staff	1.6
Paralysis/CP	1.4 Fractures	2.1	Total \$ 970,914 TOTAL FTES	10.7
Cardiovascular	10.8 Wounds, Burns		20002 Y 2/0/211 1011111 11110	
Stroke	1.0 Compl. of Sur			
Respiratory	7.6 Other Condition			
- F 2				

COUNTIES SERVED Douglas

Douglas County Home Health Care Unit
1316 North 14th Street, Suite 324
Superior WI 54880 Douglas County

(715) 395-1304

License Number: 50 Ownership of Agency: Cour	ntv				TOTAL NUMBER OF ADMISSIONS	245
Title 18 (Medicare) certifitle 19 (Medicaid) certifitle 18 (Medicaid) certifitle 19 (Medicaid) c	ified? Yes ified? Yes al? No	282			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	48.6% 46.5 4.9 0.0
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF PATIENTS 229 2,360	VISITS PER PATIENT 10.3		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	204
Home Health Aide	82 751	9.2			PERCENT DISCHARGES TO:	
Physical Therapy	159 1,268	8.0		•	Private Residences	83.8%
Spch/Occ/Resp Therapy	92 295	3.2			General Hospitals	0.0
Medical Social Service		0.0			Nursing Homes	6.9
Private Duty Nursing	0 0	0.0			Deaths	2.0
Personal Care/PC RN Sup	pv. 0 0	0.0			Other	7.4
Other Home Health Care		0.0				
Homemkr & Other Non HH		0.0				
TOTAL	XXXXXXX 4,674	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	PSEMENT SOUDCE				
Under 4 0.0%	Medicare	89.7%				
4 to 34 1.1	Medicaid	5.0				
35 to 54 5.0	Other Federa					
55 to 64 4.6	State Funds	0.0			STAFFING	FTES
65 to 74 14.2	Private Insu	rance 3.9			Administrators	1.0
75 to 84 28.0	Self Pay	0.4			Reg. Nurse Supervisors	1.0
85 & over 47.2	Other	1.1			Registered Nurses	6.0
	TOTAL PATIEN	TS 282			Licensed Practical Nurses	0.0
Males 31.6% Females	68.4 %				Home Health Aides	2.0
רסס	IMARY DIAGNOSIS		REVENUE		Physical Therapists Occupational Therapists	0.0
Infectious Disorders	0.7% Digestive Dis	orders 1.1%	Billings \$	947,477	Speech Pathologists	0.0
Cancer	4.6 Genitourinary		Disallowances	215,520	Respiratory Therapists	0.0
Diabetes	5.0 Preq. & Child		Collections	731,957	Medical Social Workers	0.0
Diseases of Blood	4.6 Arthropathies	7.4	Other	15,759	Other Therapeutic Staff	0.0
Dementia/Alzheimers	2.5 Osteopathies	17.4	Total	747,716	Personal Care Workers	0.0
Psychoses/Neuroses	1.4 Perinatal Per				Homemakers	0.0
Central Nervous Sys.	4.3 Ill-Defined C		EXPENSES		Other Staff	3.0
Paralysis/CP	0.4 Fractures	2.8	Total \$	764,034	TOTAL FTES	13.0
	30.9 Wounds, Burns					
Stroke	1.1 Compl. of Sur 2.1 Other Conditi					
Respiratory	Z.I Other Conditi	0.15				

Page 30 COUNTIES SERVED

Douglas

The Dove, Inc. 1416 Cumming Avenue, Suite 2B Superior WI 54880

Douglas County

(715) 392-3133

13) 392-3133						
License Number: 172 Ownership of Agency: No	mprofit Church			ı	TOTAL NUMBER OF ADMISSIONS	54
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Yes tified? Yes tal? No	84			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	3.7% 50.0 18.5 27.8
	NO. OF NO. O	VISITS PER		1	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS				(Including Deaths)	52
Skilled Nursing	63 923	3 14.7			, ,	
Home Health Aide	15 140	9.3			PERCENT DISCHARGES TO:	
Physical Therapy	29 16!	5.7			Private Residences	51.9%
Spch/Occ/Resp Therapy	10 53	5.3			General Hospitals	23.1
Medical Social Servic	e 0 0	0.0			Nursing Homes	3.8
Private Duty Nursing	2 1,160	580.0			Deaths	0.0
Personal Care/PC RN S					Other	21.2
Other Home Health Car						
Homemkr & Other Non H						
TOTAL	XXXXXXX 17,679	XXXXX				
AGE AND SEX OF PATIENTS	раттемт ретм	BURSEMENT SOURCE				
Under 4 0.0%	Medicare	32.6%				
4 to 34 10.7	Medicale	51.1				
35 to 54 9.5	Other Feder					
55 to 64 13.1	State Funds				STAFFING	FTES
65 to 74 19.0	Private In			,	Administrators	1.0
75 to 84 29.8	Self Pay	1.1			Req. Nurse Supervisors	1.0
85 & over 17.9	Other	0.0			Registered Nurses	3.1
	TOTAL PATII	ENTS 92			Licensed Practical Nurses	1.2
Males 42.9% Females	57.1 %				Home Health Aides	0.1
					Physical Therapists	0.0
	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Da		Billings \$	986,186	Speech Pathologists	0.0
Cancer	1.2 Genitourina:		Disallowances	92,749	Respiratory Therapists	0.0
Diabetes	6.0 Preg. & Chil		Collections	893,437	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathic		Other	19,458	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies		Total	912,895	Personal Care Workers	11.0
Psychoses/Neuroses	16.7 Perinatal Pe				Homemakers	0.0
Central Nervous Sys.			EXPENSES	EE4 010	Other Staff	2.0
Paralysis/CP Cardiovascular	2.4 Fractures	0.0	Total \$	774,912	TOTAL FTES	19.4
	17.9 Wounds, Burn 3.6 Compl. of St					
Stroke	6.0 Other Condit					
Respiratory	5.0 Other Condi	10119 10.0				

Aurora Community Health 406 Technology Drive E, #B Menomonie WI 54751 (715) 235-4667 License Number: 310 Ownership of Agency: Propriete 18 (Medicare) certifitle 19 (Medicaid) certifitle 19 (Medicaid) certifitle to unduplicated particularly propriete 19 (Medicated particularly particularly propriete 19 (Medicated particularly propriete 19 (Medicated particularly particularly propriete 19 (Medicated particularly particularly particularly particularly propriete 19 (Medicated particularly particular	ified? ified? ified?	orporation Yes Yes No	119	COUNTIES SERVED Barron Burnett Clark Dunn Eau Claire Jackson Marathon Pierce Polk Rusk St. Croix		TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes	13 23.1% 0.0 15.4
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Sug Other Home Health Care Homemkr & Other Non HH TOTAL	NO. OF PATIENTS 9 0 0 0 0 0 0 0 0 0 XXXXXXXX		TSITS PER PATIENT 18.1 0.0 0.0 0.0 0.0 361.5 0.0 0.0 XXXXXX	Taylor Trempealeau Washburn		Other TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	30.8% 0.0 0.0 30.8 38.5
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys.	Med. Med. Othe Stai Pri Sel: Othe TOT: 43.7 % IMARY DIAG 0.0% Dige: 0.0 Geni 0.8 Preg 0.0 Arth: 0.8 Oste 1.7 Peri 1.7 Ill-1 17.6 Frac 0.0 Wound 1.7 Comp.	NOSIS stive Disord tourinary Sy . & Childbir ropathies opathies natal Period Defined Cond	0.0% 100.0 0.0 0.0 0.0 0.0 0.0 119 ers 0.0% s. 0.0 th 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	2,907,601 0 2,907,601 340 2,907,941	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 1.0 3.0 0.6 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 1.8 6.4

COUNTIES SERVED Dunn

800 Wilson Avenue Menomonie WI 54751

Stroke

Respiratory

Dunn County

16.3 Wounds, Burns 2.7 Compl. of Surgery 5.4 Other Conditions

(715) 232-1518							
License Number: 51 Ownership of Agency: Co	nintv					TOTAL NUMBER OF ADMISSIONS	172
Title 18 (Medicare) cer						PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cer						Private Residences	35.5%
Affiliated with a hospi						General Hospitals	34.3
Number of unduplicated		184				Nursing Homes	29.7
Number of undupfreaced	pacienes in 200-	1 - 101				Other	0.6
	NO. OF NO.	. OF VISIT	S PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED		SITS PATI				(Including Deaths)	161
Skilled Nursing		,916 15				(======================================	
Home Health Aide		,502 18				PERCENT DISCHARGES TO:	
Physical Therapy	36	384 10				Private Residences	59.6%
Spch/Occ/Resp Therapy			.8			General Hospitals	6.8
Medical Social Service			.0			Nursing Homes	14.3
Private Duty Nursing	0		.0			Deaths	5.0
Personal Care/PC RN S	~		.0			Other	14.3
Other Home Health Car			.0			Oction	11.5
Homemkr & Other Non H			.0				
TOTAL		,897 XXX					
		,					
AGE AND SEX OF PATIENTS	PATIENT R	EIMBURSEMENT	SOURCE				
Under 4 0.0%	Medicare	9	61.0%				
4 to 34 3.8	Medicaio	f	17.0				
35 to 54 13.0	Other Fe	ederal	0.0				
55 to 64 6.5	State Fi	ınds	0.0			STAFFING	FTES
65 to 74 15.8	Private	Insurance	14.5			Administrators	1.0
75 to 84 31.5	Self Pay	y	3.0			Reg. Nurse Supervisors	0.0
85 & over 29.3	Other	=	4.5			Registered Nurses	4.2
	TOTAL PA	ATIENTS	200			Licensed Practical Nurses	0.0
Males 38.6% Females	61.4 %					Home Health Aides	0.9
						Physical Therapists	0.0
	RIMARY DIAGNOSIS			REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.5% Digestive		1.6%	Billings \$	533,684		0.0
Cancer	4.3 Genitour:		4.9	Disallowances	60,104		0.0
Diabetes	8.2 Preg. & (Childbirth	0.5	Collections	473,580	Medical Social Workers	0.0
Diseases of Blood	1.6 Arthropat		4.9	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopath	nies	1.6	Total	473,580	Personal Care Workers	0.0
Psychoses/Neuroses	0.5 Perinata		0.0			Homemakers	0.0
Central Nervous Sys.	2.7 Ill-Defin	ned Cond.	2.7	EXPENSES		Other Staff	3.3
Paralysis/CP	0.5 Fractures	3	5.4	Total \$	499,581	TOTAL FTES	9.4
Cardiovascular	16.3 Wounds, H		3.8				
Ctroleo	2 7 Compl of	F Currencer	2 2				

2.2

29.3

Lifenet 800 Wisconsin Street, Suite Eau Claire WI 54703	e 305 Eau Claire County	COUNTIES SERVED Chippewa Clark Dunn		
(715) 835-4111 License Number: 335 Ownership of Agency: Li Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	ctified? No ital? No	Eau Claire La Crosse Marathon Monroe Rusk Taylor Trempealeau	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	99 87.9% 2.0 8.1 2.0
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN SO Other Home Health Care Homemkr & Other Non F	ce 0 0 0.0 0 0 0.0 Supv. 310 24,955 80.5 ce 0 0 0.0		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	101 74.3% 3.0 19.8 3.0 0.0
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 21.5 35 to 54 34.4 55 to 64 10.3 65 to 74 11.8 75 to 84 13.3 85 & over 8.7 Males 42.6% Females	• ,	REVENUE Billings \$ 1,060,526 Disallowances 8,910 Collections 1,051,616 Other 0 Total 1,051,616 EXPENSES Total \$ 1,333,493	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 1.0 0.0 3.5 0.0 0.7 0.0 0.0 0.0 0.0 0.0 0.0 10.4 62.6

Mission Home Health Luthera 1101 West Clairemont Avenue Eau Claire WI 54701 (715) 855-5043			COUNTIES SERVED Chippewa Clark Dunn Eau Claire Jackson	попа г	NUMBER OF ADMISSIONS	15
License Number: 1010 Ownership of Agency: No	nnrofit Church/Corne	ration	Monroe	IOIAL	NUMBER OF ADMISSIONS	15
Title 18 (Medicare) cer		racion		PERCEI	NT ADMISSIONS FROM:	
Title 19 (Medicaid) cer					vate Residences	6.7%
Affiliated with a hospi	tal? No			Gene	eral Hospitals	0.0
Number of unduplicated	patients in 2004 =	99		Nurs	sing Homes	0.0
				Othe	er	93.3
G_D	NO. OF NO. OF	VISITS PER			NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT		(.	Including Deaths)	4
Skilled Nursing Home Health Aide	3 288	96.0 0.0		DEDGE	NT DISCHARGES TO:	
	0 0	0.0			vate Residences	0.0%
Physical Therapy Spch/Occ/Resp Therapy		0.0			eral Hospitals	0.0%
Medical Social Servic		0.0			erar Hospicars sing Homes	0.0
Private Duty Nursing	0 0	0.0		Deat		50.0
Personal Care/PC RN S		407.3		Othe		50.0
Other Home Health Car		0.0		OCIN	21	30.0
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 80,935	XXXXX				
	,					
AGE AND SEX OF PATIENTS		RSEMENT SOURCE				
Under 4 0.0%	Medicare	0.0%				
4 to 34 25.3	Medicaid	100.0				
35 to 54 43.4	Other Federa			C	T.17G	
55 to 64 23.2	State Funds	0.0		STAFF:		FTES
65 to 74 4.0	Private Insu	rance 0.0 0.0			inistrators	1.0
75 to 84 4.0 85 & over 0.0	Self Pay Other	0.0			. Nurse Supervisors istered Nurses	0.0 4.0
85 & OVEL 0.0	TOTAL PATIEN				ensed Practical Nurses	0.0
Males 47.5% Females	52.5 %	115			e Health Aides	0.0
March 47.50 Temates	32.3				sical Therapists	0.0
P	RIMARY DIAGNOSIS		REVENUE		upational Therapists	0.0
Infectious Disorders	0.0% Digestive Dis	orders 1.0%	Billings \$ 2,	922,649 Spe	ech Pathologists	0.0
Cancer	0.0 Genitourinary	Sys. 1.0			piratory Therapists	0.0
Diabetes	1.0 Preg. & Child			•	ical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies		Other		er Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies	0.0	Total 2,	- · , - · · ·	sonal Care Workers	79.9
Psychoses/Neuroses	12.1 Perinatal Per				emakers	0.0
Central Nervous Sys.	1.0 Ill-Defined (EXPENSES		er Staff	2.8
Paralysis/CP	8.1 Fractures	0.0	Total \$ 2,	911,321 TOTA	AL FTES	87.7
Cardiovascular	3.0 Wounds, Burns					
Stroke	1.0 Compl. of Sur 0.0 Other Conditi					
Respiratory	0.0 Other Conditi	OIIS 68./				

Northwest Wisconsin Homecare 2620 Stein Boulevard, Box 20 Eau Claire WI 54702 (715) 831-0100 License Number: 127	60	aire Count	У	COUNTIES SERVED Barron Buffalo Chippewa Dunn Eau Claire Jackson		TOTAL NUMBER OF ADMISSIONS	603
Ownership of Agency: Non		vate		Pierce		TOTAL NORDER OF IDMISSIONS	003
Title 18 (Medicare) cert Title 19 (Medicaid) cert		Yes		Polk		PERCENT ADMISSIONS FROM:	FC 49.
Affiliated with a hospit		Yes Yes		Rusk St. Croix		Private Residences General Hospitals	56.4% 36.8
Number of unduplicated p			714	Trempealeau		Nursing Homes	5.8
E CONTRACTOR DE				1		Other	1.0
	NO. OF	NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	597
Skilled Nursing	416	6,198	14.9			(including bodons,	0,7
Home Health Aide	137	8,110	59.2			PERCENT DISCHARGES TO:	
Physical Therapy	168	891	5.3			Private Residences	75.4%
Spch/Occ/Resp Therapy	70	249	3.6			General Hospitals	3.4
Medical Social Service	46	88	1.9			Nursing Homes	7.4
Private Duty Nursing	10	2,624	262.4			Deaths	3.0
Personal Care/PC RN Su		11,815	67.1			Other	10.9
Other Home Health Care		41	6.8				
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXXX	30,016	XXXXX				
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	SEMENT SOURCE				
Under 4 0.4%	Med	icare	58.4%				
4 to 34 9.8	Med	icaid	11.7				
35 to 54 9.7	Oth	er Federal	0.0				
55 to 64 10.4	Sta	te Funds	0.0			STAFFING	FTES
65 to 74 17.4		vate Insur				Administrators	0.0
75 to 84 26.3		f Pay	5.7			Reg. Nurse Supervisors	13.0
85 & over 26.1	Oth		12.1			Registered Nurses	17.0
		AL PATIENT	'S 766			Licensed Practical Nurses	2.6
Males 43.1% Females	56.9 %					Home Health Aides	17.4
7.7	IMARY DIAG	TO G T G		REVENUE		Physical Therapists	1.6
Infectious Disorders						Occupational Therapists	1.3
Cancer		stive Diso tourinary		Billings \$ Disallowances		Speech Pathologists Respiratory Therapists	0.0
Diabetes		. & Childb		Collections	652,818 2,075,521	Medical Social Workers	4.0
Diseases of Blood	1.3 Arth:		7.1	Other	5,608	Other Therapeutic Staff	0.1
Dementia/Alzheimers	0.7 Oste		1.0	Total	2,081,129	Personal Care Workers	5.2
Psychoses/Neuroses		natal Peri		10041	2,001,129	Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSE	s	Other Staff	29.8
Paralysis/CP	2.1 Frac		0.3	Total \$		TOTAL FTES	91.9
<u> </u>		ds, Burns	3.6	· ·	,,		
Stroke		l. of Surg					
Respiratory	<u>L</u>	r Conditio					

Fond du Lac County Home Health Service 160 South Macy Street Fond du Lac WI 54935 Fond du

COUNTIES SERVED Fond du Lac

Fond du Lac County

(920) 929-3085

License Number: 54 Ownership of Agency: Cou	intv			5	TOTAL NUMBER OF ADMISSIONS	194
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Yes ified? Yes al? No	= 247		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	52.1% 30.9 7.2 9.8
SERVICES PROVIDED Skilled Nursing	NO. OF NO. PATIENTS VISI	TS PATIENT		:	FOTAL NUMBER OF DISCHARGES (Including Deaths)	204
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	53 2,6 35 2 11 0 0 0 apv. 228 5,4	08 49.2 59 7.4 48 4.4 0 0.0 0 0.0 01 23.7 0 0.0 0 0.0		1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	65.7% 12.3 10.3 2.9 8.8
AGE AND SEX OF PATIENTS Under 4	Medicare Medicaid Other Fed State Fur Private I Self Pay Other	ds 23.0 nsurance 4.2 4.2 29.1		S	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses	FTES 1.0 0.6 19.8
Males 27.9% Females	TOTAL PAT	IENTS 261			Licensed Practical Nurses Home Health Aides Physical Therapists	0.0 4.4 0.0
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP	NIMARY DIAGNOSIS 0.4% Digestive 2.4 Genitourir 6.5 Preg. & Ch 1.2 Arthropath 1.2 Osteopath 2.4 Perinatal 5.7 Ill-Define 0.4 Fractures 19.0 Wounds, Bu 5.3 Compl. of 3.6 Other Cond	ary Sys. 2.4 ildbirth 0.0 ies 20.2 es 0.0 Period 1.6 d Cond. 7.3 4.9 rns 3.2 Surgery 0.4	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	688,306 136,258 552,048 0 552,048	Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.0 0.0 0.0 0.0 0.0 4.1 0.0 11.5 41.4

Title 18 (Medicare) cert Title 19 (Medicaid) cert	Fond du Lac County profit Church/Corporation ified? Yes ified? Yes		Adams Calumet Dodge Fond du Lac Green Lake Sheboygan Washington Winnebago	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences	568 7.9%
Department of a hospital Number of unduplicated p		517		General Hospitals Nursing Homes Other	81.7 8.6 1.8
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non He	PATIENTS VISITS PA 511 4,786 90 1,378 214 2,110 93 1,156 108 137 0 0 100 0 100 0 110 0 0 110 0 0 110 0 0 110 0 0	SITS PER TIENT 9.4 15.3 9.9 12.4 1.3 0.0 0.0 0.0		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	781 81.9% 1.4 6.9 2.6 7.2
Under 4 3.9% 4 to 34 6.8 35 to 54 15.3 55 to 64 13.7 65 to 74 16.2 75 to 84 28.2 85 & over 15.9 Males 45.6% Females PR Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	Medicare Medicaid Other Federal State Funds Private Insurance Self Pay Other TOTAL PATIENTS 54.4 % RIMARY DIAGNOSIS 2.7% Digestive Disorder 4.3 Genitourinary Sys. 2.9 Preg. & Childbirth 0.4 Arthropathies 0.2 Osteopathies 0.0 Perinatal Period 1.0 Ill-Defined Cond. 0.2 Fractures 9.1 Wounds, Burns 0.8 Compl. of Surgery 4.8 Other Conditions	64.1% 4.6 0.0 2.8 25.3 0.7 2.6 613	Collections 1,301	,832 Respiratory Therapists ,751 Medical Social Workers ,039 Other Therapeutic Staff ,790 Personal Care Workers Homemakers Other Staff	FTES 1.0 1.2 9.0 0.0 1.9 3.9 0.2 0.2 0.0 0.9 0.0 2.6 20.8

Grant County Home Nursing Service 111 South Jefferson Street

Lancaster WI 53813 Grant County

(608) 723-6416

08) 723-6416						
License Number: 57 Ownership of Agency: Co	ountv			•	TOTAL NUMBER OF ADMISSIONS	263
Title 18 (Medicare) cer				:	PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cer	tified? Yes				Private Residences	22.4%
Affiliated with a hospi					General Hospitals	56.3
Number of unduplicated	patients in 2004 =	273			Nursing Homes	17.5
					Other	3.8
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	266
Skilled Nursing	244 2,139	8.8				
Home Health Aide	48 504	10.5		:	PERCENT DISCHARGES TO:	
Physical Therapy	122 955	7.8			Private Residences	72.2%
Spch/Occ/Resp Therapy		3.9			General Hospitals	12.4
Medical Social Servic		0.0			Nursing Homes	7.1
Private Duty Nursing	0 0	0.0			Deaths	3.0
Personal Care/PC RN S		20.9			Other	5.3
Other Home Health Car		0.0				
Homemkr & Other Non H	IH 0 0 XXXXXXX 5,322	0.0 XXXXX				
TOTAL	XXXXXXX 5,322	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	RSEMENT SOURCE				
Under 4 0.0%	Medicare	51.4%				
4 to 34 3.3	Medicaid	16.7				
35 to 54 7.7	Other Federa					
55 to 64 11.0	State Funds	0.0		i	STAFFING	FTES
65 to 74 24.9	Private Insu				Administrators	1.0
75 to 84 34.8	Self Pay	18.1			Reg. Nurse Supervisors	0.6
85 & over 18.3	Other	0.3			Registered Nurses	3.7
	TOTAL PATIENT	TS 288			Licensed Practical Nurses	0.0
Males 38.8% Females	61.2 %				Home Health Aides	0.6
D	RIMARY DIAGNOSIS		REVENUE		Physical Therapists	0.0
Infectious Disorders	0.7% Digestive Disc	orders 0.0%	Billings \$	574,453	Occupational Therapists Speech Pathologists	0.0
Cancer	4.4 Genitourinary		Disallowances	60,070	Respiratory Therapists	0.0
Diabetes	8.4 Preq. & Child	2	Collections	514,383	Medical Social Workers	0.0
Diseases of Blood	0.7 Arthropathies	14.3	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	3.7 Osteopathies	1.1	Total	514,383	Personal Care Workers	1.2
Psychoses/Neuroses	2.2 Perinatal Per		10041	511,505	Homemakers	0.0
Central Nervous Sys.	2.6 Ill-Defined Co		EXPENSES		Other Staff	1.1
Paralysis/CP	0.7 Fractures	4.4	Total \$	560,232	TOTAL FTES	8.2
Cardiovascular	13.6 Wounds, Burns	1.1		,		
Stroke	3.7 Compl. of Sur					
Respiratory	3.7 Other Condition					

COUNTIES SERVED Grant

Homeward Bound Home Health		COUNTIES SERVED		
130 West Elm Street, PO Box	: 503	Adams		
Lancaster WI 53813	Grant County	Columbia		
(608) 723-6601	•	Crawford Grant		
(000) 725 0001		Iowa		
License Number: 330 Ownership of Agency: Pr	conrietary Corporation		TOTAL NUMBER OF ADMISSIONS	222
Title 18 (Medicare) cer		<u> </u>	PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cer		Sauk	Private Residences	20.3%
Affiliated with a hospi		Vernon	General Hospitals	32.0
Number of unduplicated			Nursing Homes	7.2
			Other	40.5
	NO. OF NO. OF VISITS PER		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT		(Including Deaths)	209
Skilled Nursing	217 3,117 14.4			
Home Health Aide	66 1,985 30.1		PERCENT DISCHARGES TO:	
Physical Therapy	43 234 5.4		Private Residences	48.3%
Spch/Occ/Resp Therapy			General Hospitals	6.2
Medical Social Servic			Nursing Homes	9.1
Private Duty Nursing	0 0 0.0		Deaths	5.3
Personal Care/PC RN S			Other	31.1
Other Home Health Car				
Homemkr & Other Non H				
TOTAL	XXXXXXX 37,094 XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE			
Under 4 0.0%	Medicare 21.1%			
4 to 34 7.8	Medicaid 60.1			
35 to 54 14.2	Other Federal 0.0			
55 to 64 13.9	State Funds 10.1		STAFFING	FTES
65 to 74 21.4	Private Insurance 7.2		Administrators	0.5
75 to 84 28.6	Self Pay 0.6		Reg. Nurse Supervisors	1.0
85 & over 14.2	Other 0.9		Registered Nurses	6.5
	TOTAL PATIENTS 346		Licensed Practical Nurses	1.5
Males 35.3% Females	64.7 %		Home Health Aides	1.4
_			Physical Therapists	0.0
	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists	0.0
Infectious Disorders	0.6% Digestive Disorders 1.4%	Billings \$ 2,459,079	Speech Pathologists	0.0
Cancer	2.9 Genitourinary Sys. 0.6	Disallowances 735,318	Respiratory Therapists	0.0
Diabetes	5.5 Preg. & Childbirth 0.0	Collections 1,723,761 Other 0	Medical Social Workers	0.0
Diseases of Blood	0.3 Arthropathies 15.3	0 01101	Other Therapeutic Staff	0.3
Dementia/Alzheimers	2.0 Osteopathies 1.7 4.0 Perinatal Period 0.3	Total 1,723,761	Personal Care Workers Homemakers	36.8 0.0
Psychoses/Neuroses Central Nervous Sys.	4.6 Ill-Defined Cond. 6.1	EXPENSES	Other Staff	5.1
Paralysis/CP	3.5 Fractures 4.0	Total \$ 1,649,884	TOTAL FTES	53.0
Cardiovascular	14.2 Wounds, Burns 4.3	100α1 γ 1,049,004	IOIVI LIES	JJ.U
Stroke	3.8 Compl. of Surgery 1.7			
Respiratory	7.8 Other Conditions 15.3			
nespiracor _j	conditioned 13.3			

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The Monroe Clinic Home Care

515 22nd Avenue

Monroe WI 53566 Green County

COUNTIES SERVED
Green
Lafayette
Rock

(608) 324-1230

Ownership of Agency: Nonprofit Corporation	Ownership of Agency: Nonpro Title 18 (Medicare) certif	ied? Y	ooration				TOTAL NUMBER OF ADMISSIONS	357
Title 19 (Medicaid) certified? Yes Department of a hospital? Yes Yes Number of unduplicated patients in 2004 = 375 375								33,
SERVICES PROVIDED PATIENTS VISITS PATIENT (Including Deaths) 35 Skilled Nursing 294 2,823 9.6 Home Health Aide 54 614 11.4 PERCENT DISCHARGES TO: Physical Therapy 225 2,256 10.0 Private Residences 78.3 Spch/Occ/Resp Therapy 56 289 5.2 General Hospitals 5.4 Medical Social Service 22 38 1.7 Nursing Homes 1.7 Private Duty Nursing 0 0 0.0 Other Other 0ther 12.5 Other Home Health Care 0 0 0.0 Other Other 0ther 12.5 Other Homemkr & Other Non HH 0 0 0.0 Other Other 0.0 Other VIVIAL AID VIVIAL AI	Department of a hospital?	Y	les les	375			Private Residences General Hospitals Nursing Homes	21.3% 66.4 0.8 11.5
Skilled Nursing								
Home Health Aide 54 614 11.4 PERCENT DISCHARGES TO:							(Including Deaths)	350
Physical Therapy 225 2,256 10.0 Private Residences 78.3 Spch/Occ/Resp Therapy 56 289 5.2 General Hospitals 5.4 Medical Social Service 22 38 1.7 Nursing Homes 1.7 Private Duty Nursing 0 0 0.0 Deaths 1.7 Personal Care/PC RN Supv. 0 0 0.0 Other 12.9 Other Home Health Care 0 0 0.0 Other 12.9 Homewise & Other Non HH 0 0 0.0 Other 0.0 TOTAL XXXXXXXX 6,020 XXXXXX 0.0 Other 0.0 Windows 4 1.3% Medicare 75.5% <t< td=""><td>9</td><td></td><td>•</td><td></td><td></td><td></td><td></td><td></td></t<>	9		•					
Spch/Occ/Resp Therapy 56 289 5.2 General Hospitals 5.4 Medical Social Service 22 38 1.7 Nursing Homes 1.7 Private Duty Nursing 0 0 0.0 Deaths 1.7 Personal Care/PC RN Supv. 0 0 0.0 Other 0 0.0 Other Home Health Care 0 0 0.0 0.0 Other 0.0 0.0 0.0 Other 0.0								
Medical Social Service 22 38 1.7 Nursing Homes 1.7 Private Duty Nursing 0 0 0.0 Deaths 1.7 Personal Care/PC RN Supv. 0 0 0.0 Other 12.5 Other Home Health Care 0 0 0.0 Other 12.5 Homemkr & Other Non HH 0 0 0.0 Other Other TOTAL XXXXXXXX 6,020 XXXXXX Other Other Other Under 4 1.3% Medicare 75.5% Other <	2 1.2		•					78.3%
Private Duty Nursing 0 0 0.0 Deaths 1.7 Personal Care/PC RN Supv. 0 0 0.0 Other 12.5 Other Home Health Care 0 0 0.0 0.0 Other 0.0 HOMEMER & Other Non HH 0 0 0.0 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								
Personal Care/PC RN Supv. 0 0 0.0 Other 12.9 Other Home Health Care 0 0 0.0 Homemkr & Other Non HH 0 0 0.0 TOTAL XXXXXXXX 6,020 XXXXXXX 6,020 XXXXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 1.3% Medicare 75.5% 4 to 34 2.7 Medicaid 2.7 35 to 54 12.3 Other Federal 0.0 STAFFING FTES 65 to 64 12.8 State Funds 0.0 STAFFING FTES 65 to 74 19.5 Private Insurance 21.3 Administrators 0.5 75 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.5				= • •			<u> </u>	
Other Home Health Care 0 0 0 0.0 Homemkr & Other Non HH 0 0 0 0.0 TOTAL XXXXXXX 6,020 XXXXX AGE AND SEX OF PATIENTS Under 4 1.3% Medicare 75.5% 4 to 34 2.7 Medicaid 2.7 Medicaid 2.7 Medicaid 55 to 64 12.3 Other Federal 0.0 STAFFING FTES 65 to 74 19.5 Private Insurance 21.3 Administrators 0.5 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.5 Series of the se		-	-					
Homemkr & Other Non HH 0 0 0 0.0 TOTAL XXXXXXX 6,020 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 1.3% Medicare 75.5% 4 to 34 2.7 Medicaid 2.7 35 to 54 12.3 Other Federal 0.0 55 to 64 12.8 State Funds 0.0 STAFFING FTES 65 to 74 19.5 Private Insurance 21.3 Administrators 0.5 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1			ū				other	12.9
### TOTAL XXXXXXX 6,020 XXXXX #### AND SEX OF PATIENTS								
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4		-	-					
Under 4 1.3% Medicare 75.5% 4 to 34 2.7 Medicaid 2.7 35 to 54 12.3 Other Federal 0.0 55 to 64 12.8 State Funds 0.0 STAFFING FTES 65 to 74 19.5 Private Insurance 21.3 Administrators 0.5 75 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.5	1011111	21212121212121	0,020	2121212121				
4 to 34 2.7 Medicaid 2.7 35 to 54 12.3 Other Federal 0.0 55 to 64 12.8 State Funds 0.0 65 to 74 19.5 Private Insurance 21.3 Administrators 0.5 75 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.5	AGE AND SEX OF PATIENTS	PATIEN	T REIMBUR	SEMENT SOURCE				
35 to 54 12.3 Other Federal 0.0 55 to 64 12.8 State Funds 0.0 65 to 74 19.5 Private Insurance 21.3 75 to 84 28.3 Self Pay 0.5 85 & over 23.2 Other 0.0 STAFFING Administrators O.5 Reg. Nurse Supervisors 1.0 Registered Nurses 3.5	Under 4 1.3%	Medi	care	75.5%				
55 to 64 12.8 State Funds 0.0 STAFFING FTES 65 to 74 19.5 Private Insurance 21.3 Administrators 0.5 75 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.5	4 to 34 2.7	Medi	caid	2.7				
65 to 74	35 to 54 12.3	Othe	er Federal					
75 to 84 28.3 Self Pay 0.5 Reg. Nurse Supervisors 1.0 85 & over 23.2 Other 0.0 Registered Nurses 3.9								FTES
85 & over 23.2 Other 0.0 Registered Nurses 3.9								0.5
3								1.0
	85 & over 23.2							
	W] 41 20 F] F		YT ballenl	S 375			Licensed Practical Nurses	0.0
	Males 41.3% Females 5	8.7 %						0.6 1.3
	рртм	ADV DIACK	IOCTC		DEVENITE			0.2
				orders 4 8%		1 143 641		0.2
								0.0
					Collections	889,966	Medical Social Workers	0.0
Diabeles 4.5 Preg. & Unilopiren U.3 Collections 889.966 Medical Social Workers U.C						0		0.0
				12.3	Total	889,966	Personal Care Workers	0.0
Diseases of Blood 0.5 Arthropathies 20.3 Other 0 Other Therapeutic Staff 0.0						,	Homemakers	0.0
Diseases of Blood 0.5 Arthropathies 20.3 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 12.3 Total 889,966 Personal Care Workers 0.0		.8 Ill-D	Defined Co	ond. 6.7	EXPENSES		Other Staff	1.5
Diseases of Blood 0.5 Arthropathies 20.3 Other 0.0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 12.3 Total 889,966 Personal Care Workers 0.0 Psychoses/Neuroses 1.1 Perinatal Period 0.5 Homemakers 0.0				5.6	Total \$	843,992	TOTAL FTES	9.0
Diseases of Blood 0.5 Arthropathies 20.3 Other 0.0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 12.3 Total 889,966 Personal Care Workers 0.0 Psychoses/Neuroses 1.1 Perinatal Period 0.5 Homemakers 0.0 Central Nervous Sys. 0.8 Ill-Defined Cond. 6.7 EXPENSES Other Staff 1.5 Paralysis/CP 0.0 Fractures 5.6 Total \$ 843,992 TOTAL FTES 9.0	Cardiovascular 9			0.8				
Diseases of Blood 0.5 Arthropathies 20.3 Other 0.0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 12.3 Total 889,966 Personal Care Workers 0.0 Psychoses/Neuroses 1.1 Perinatal Period 0.5 Homemakers 0.0 Central Nervous Sys. 0.8 Ill-Defined Cond. 6.7 EXPENSES Other Staff 1.5 Paralysis/CP 0.0 Fractures 5.6 Total \$ 843,992 TOTAL FTES 9.0 Cardiovascular 9.6 Wounds, Burns 0.8								
Diseases of Blood 0.5 Arthropathies 20.3 Other 0 Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 12.3 Total 889,966 Personal Care Workers 0.0 Psychoses/Neuroses 1.1 Perinatal Period 0.5 Homemakers 0.0 Central Nervous Sys. 0.8 Ill-Defined Cond. 6.7 EXPENSES Other Staff 1.5 Paralysis/CP 0.0 Fractures 5.6 Total \$ 843,992 TOTAL FTES 9.0 Cardiovascular 9.6 Wounds, Burns 0.8 Stroke 1.1 Compl. of Surgery 2.7	Respiratory 6	.7 Other	Conditio	ons 8.8				

CHN Home Care 270 East Marquette Street Berlin Wi 54923 (920) 361-5555 License Number: 235 Ownership of Agency: Non Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital	ified? Yes ified? Yes		COUNTIES SERVED Fond du Lac Green Lake Marinette Portage Waupaca Waushara Winnebago	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals	436 10.3% 48.4
Number of unduplicated p		477		Nursing Homes Other	14.2 27.1
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH TOTAL	PATIENTS VISITS PATE	ITS PER TIENT 10.8 23.2 6.5 4.9 1.1 0.0 25.4 0.0 0.0 0XXXX		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	448 61.6% 10.9 3.3 2.7 21.4
AGE AND SEX OF PATIENTS Under 4 1.5% 4 to 34 2.3 35 to 54 7.1 55 to 64 7.1 65 to 74 23.7 75 to 84 27.9 85 & over 30.4 Males 39.8% Females PR Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	PATIENT REIMBURSEMEN Medicare Medicaid Other Federal State Funds Private Insurance Self Pay Other TOTAL PATIENTS 60.2 % RIMARY DIAGNOSIS 0.8% Digestive Disorders 1.9 Genitourinary Sys. 3.4 Preg. & Childbirth 2.3 Arthropathies 0.2 Osteopathies 0.2 Osteopathies 0.8 Perinatal Period 0.2 Ill-Defined Cond. 0.0 Fractures 8.4 Wounds, Burns 2.3 Compl. of Surgery 5.2 Other Conditions	71.5% 5.8 0.0 0.0 14.2 5.5 2.9 548	REVENUE Billings \$ 1,065,931 Disallowances -175,731 Collections 1,241,662 Other 86,247 Total 1,327,909 EXPENSES Total \$ 1,400,555	Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff	FTES 1.0 1.0 5.8 0.0 6.1 0.8 0.2 0.0 0.0 0.0 2.4 17.3

Upland Hills Home Care 800 Compassion Way Dodgeville WI 53533 (608) 930-7210 License Number: 60 Ownership of Agency: Nor	Iowa County	COUNTIES SERVED Dane Grant Iowa Lafayette Richland Sauk	TOTAL NUMBER OF ADMISSIONS 343
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	tified? Yes tified? Yes l? Yes		PERCENT ADMISSIONS FROM: Private Residences 16.9% General Hospitals 54.2 Nursing Homes 26.2 Other 2.6
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non Hi	0 0 0.0 upv. 45 2,888 64.2 e 0 0.0		TOTAL NUMBER OF DISCHARGES (Including Deaths) 337 PERCENT DISCHARGES TO: Private Residences 73.0% General Hospitals 4.5 Nursing Homes 10.7 Deaths 2.1 Other 9.8
AGE AND SEX OF PATIENTS Under 4 1.9% 4 to 34 7.5 35 to 54 11.6 55 to 64 12.7 65 to 74 15.6 75 to 84 31.8 85 & over 18.9 Males 45.0% Females PI Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	PATIENT REIMBURSEMENT SOURCE Medicare 62.5 Medicaid 6.7 Other Federal 0.0 State Funds 2.0 Private Insurance 28.1 Self Pay 0.5 Other 70.2 TOTAL PATIENTS 405 S5.0 % RIMARY DIAGNOSIS 0.8% Digestive Disorders 1.1% 3.0 Genitourinary Sys. 1.3 3.8 Preg. & Childbirth 0.5 3.2 Arthropathies 2.2 0.0 Osteopathies 1.3 0.0 Perinatal Period 0.0 0.1 Ill-Defined Cond. 1.1 0.3 Fractures 0.0 7.8 Wounds, Burns 0.3 0.0 Compl. of Surgery 5.1 3.2 Other Conditions 65.0		STAFFING FTES Administrators 0.5 Reg. Nurse Supervisors 1.0 Registered Nurses 4.5 Licensed Practical Nurses 0.9 Home Health Aides 3.3 Physical Therapists 0.5 Occupational Therapists 0.1 Speech Pathologists 0.0 Respiratory Therapists 0.0 Medical Social Workers 0.0 Other Therapeutic Staff 0.0 Personal Care Workers 2.2 Homemakers 0.0 Other Staff 3.5 TOTAL FTES 16.6

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ne View Home Health COUNTIES SERVED

Pine View Home HealthCOUNTIES S400 CTH RClark

400 CTH R

Black River Falls WI 54615

Jackson County

Jackson Monroe

(715) 284-9495

15) 284-9495							
License Number: 219 Ownership of Agency: Cour	ntv				•	TOTAL NUMBER OF ADMISSIONS	163
Title 18 (Medicare) cert:	ified?	Yes			1	PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert:		Yes				Private Residences	29.4%
Affiliated with a hospita		No				General Hospitals	57.1
Number of unduplicated pa	atients in	2004 =	259			Nursing Homes	11.7
						Other	1.8
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT		•	FOTAL NUMBER OF DISCHARGES (Including Deaths)	159
Skilled Nursing	184	1,431	7.8				
Home Health Aide	72	2,721	37.8]	PERCENT DISCHARGES TO:	
Physical Therapy	76	679	8.9			Private Residences	62.3%
Spch/Occ/Resp Therapy	37	316	8.5			General Hospitals	23.9
Medical Social Service	0	0	0.0			Nursing Homes	2.5
Private Duty Nursing	0	0	0.0			Deaths	0.6
Personal Care/PC RN Sup		14,509	96.1			Other	10.7
Other Home Health Care	0	0	0.0				
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXX	19,656	XXXXX				
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	SEMENT SOURCE				
Under 4 0.8%	Med	icare	47.9%				
4 to 34 3.5	Med	icaid	32.8				
35 to 54 14.7	Othe	er Federal	0.0				
55 to 64 13.9	Stat	te Funds	0.0		:	STAFFING	FTES
65 to 74 22.0	Priv	vate Insur	ance 12.0			Administrators	1.0
75 to 84 23.9	Seli	f Pay	5.4			Reg. Nurse Supervisors	1.0
85 & over 21.2	Othe	er	1.9			Registered Nurses	4.0
		AL PATIENT	S 259			Licensed Practical Nurses	0.1
Males 44.0% Females	56.0 %					Home Health Aides	3.9
						Physical Therapists	0.0
	IMARY DIAGI			REVENUE		Occupational Therapists	0.0
Infectious Disorders	1.5% Diges			Billings \$	1,004,443	Speech Pathologists	0.0
Cancer		tourinary		Disallowances	232,454	Respiratory Therapists	0.0
	10.8 Preg			Collections	771 , 989	Medical Social Workers	0.0
Diseases of Blood	1.5 Arth		7.3	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	1.2 Osteo		1.5	Total	771,989	Personal Care Workers	7.4
Psychoses/Neuroses		natal Peri				Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	3.0
Paralysis/CP	2.3 Fract		3.5	Total \$	1,181,986	TOTAL FTES	20.4
Cardiovascular	7.7 Wound		1.2				
Stroke		l. of Surg					
Respiratory	3.1 Otne	r Conditio	ns 24.3				

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Fort Healthcare Home Health

611 Sherman Avenue East Fort Atkinson WI 53538

Jefferson County

Dane Jefferson Rusk Walworth

COUNTIES SERVED

(920) 568-6500

20) 300-0300		WALWOILII	
License Number: 137 Ownership of Agency: No	omprofit Corporation	TOTAL NUMBER OF ADMISSIONS 37	0
Title 18 (Medicare) cer Title 19 (Medicaid) cer Department of a hospita Number of unduplicated	rtified? Yes rtified? Yes al? Yes	PERCENT ADMISSIONS FROM: Private Residences 28.4 General Hospitals 57.6 Nursing Homes 8.9 Other 5.1	
	NO. OF NO. OF VISITS PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT	(Including Deaths) 37	9
Skilled Nursing	365 2,778 7.6		
Home Health Aide	51 2,608 51.1	PERCENT DISCHARGES TO:	
Physical Therapy	137 592 4.3 y 37 127 3.4	Private Residences 80.7	
Spch/Occ/Resp Therapy Medical Social Service		General Hospitals 1.3 Nursing Homes 2.1	
Private Duty Nursing	0 0 0.0	Deaths 2.6	
Personal Care/PC RN S		Other 13.2	
Other Home Health Car			
Homemkr & Other Non H	HH 0 0.0		
TOTAL	XXXXXXX 6,142 XXXXX		
AGE AND SEX OF PATIENTS	S PATIENT REIMBURSEMENT SOURCE		
Under 4 13.7%	Medicare 59.7%		
4 to 34 2.5	Medicaid 9.0		
35 to 54 10.7	Other Federal 0.0		
55 to 64 14.5	State Funds 0.2	STAFFING FTES	i
65 to 74 15.3	Private Insurance 21.1	Administrators 0.0	
75 to 84 19.1	Self Pay 2.4	Reg. Nurse Supervisors 1.0	
85 & over 24.3	Other 7.6	Registered Nurses 3.2	
w 1 22 20 T 1	TOTAL PATIENTS 422	Licensed Practical Nurses 0.0	
Males 38.0% Females	s 62.0 %	Home Health Aides 2.1	
Ţ.	PRIMARY DIAGNOSIS	Physical Therapists 0.4 REVENUE Occupational Therapists 0.3	
Infectious Disorders		Billings \$ 618,117 Speech Pathologists 0.0	
Cancer	1.4 Genitourinary Sys. 1.6	Disallowances 61,813 Respiratory Therapists 0.0	
Diabetes	3.0 Preg. & Childbirth 0.5	Collections 556,304 Medical Social Workers 0.2	
Diseases of Blood	0.5 Arthropathies 1.6	Other 0 Other Therapeutic Staff 0.0	
Dementia/Alzheimers	0.0 Osteopathies 0.8	Total 556,304 Personal Care Workers 0.0	
Psychoses/Neuroses	1.4 Perinatal Period 12.3	Homemakers 0.0	
Central Nervous Sys.	0.0 Ill-Defined Cond. 3.3	EXPENSES Other Staff 1.5	
Paralysis/CP Cardiovascular	0.5 Fractures 0.5 11.5 Wounds, Burns 0.5	Total \$ 653,417 TOTAL FTES 8.6	
Stroke	0.3 Compl. of Surgery 4.1		
Respiratory	3.0 Other Conditions 49.5		
TOSPITACOI,	5.5 561161 661141616115 45.5		

Jefferson County Health Department N3995 Annex Road

COUNTIES SERVED
Jefferson

Jefferson WI 53549

Jefferson County

(920) 674-7275

License Number: 63 Ownership of Agency: Cou	intv	TOTAL NUMBER OF ADMISSIONS 10	07
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No	PERCENT ADMISSIONS FROM: Private Residences 19.6 General Hospitals 53.3 Nursing Homes 7.5 Other 19.6	3 5
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF VISITS PER PATIENTS VISITS PATIENT 106 1,389 13.1	TOTAL NUMBER OF DISCHARGES (Including Deaths) 10	02
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	47 1,638 34.9 61 775 12.7 25 198 7.9 6 0 0 0.0 70 0 0.0 8 0 0 0.0 8 0 0 0.0 8 0 0 0.0	PERCENT DISCHARGES TO: Private Residences 74.5 General Hospitals 10.8 Nursing Homes 5.5 Deaths 0.6 Other 8.8	8 9 0
AGE AND SEX OF PATIENTS Under 4 0.7% 4 to 34 10.4 35 to 54 8.9 55 to 64 6.7 65 to 74 20.7 75 to 84 34.8 85 & over 17.8	PATIENT REIMBURSEMENT SOURCE Medicare 52.0% Medicaid 31.8 Other Federal 0.0 State Funds 0.0 Private Insurance 11.5 Self Pay 1.4 Other 3.4 TOTAL PATIENTS 148	STAFFING FTES Administrators 0.5 Reg. Nurse Supervisors 0.5 Registered Nurses 2.0 Licensed Practical Nurses 0.0	7 5 0
Males 40.7% Females		Home Health Aides 1.2 Physical Therapists 0.0	2
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	O.0% Digestive Disorders 1.5% O.0 Genitourinary Sys. 0.7 O.0 Preg. & Childbirth 0.0 O.7 Arthropathies 2.2 O.0 Osteopathies 0.7 4.4 Perinatal Period 0.0 1.5 Ill-Defined Cond. 3.7 O.0 Fractures 0.7 7.4 Wounds, Burns 9.6 2.2 Compl. of Surgery 0.7 2.2 Other Conditions 61.5	REVENUE Billings \$ 543,378 Speech Pathologists 0.0 Disallowances 200,903 Respiratory Therapists 0.0 Collections 342,475 Medical Social Workers 0.0 Other 145,527 Other Therapeutic Staff 0.0 Total 488,002 Personal Care Workers 0.0 Homemakers 0.0 EXPENSES Other Staff 2.0 Total \$ 579,622 TOTAL FTES 6.3	0 0 0 0 0 0

KJM Home Health Care Agency 111 North Third Street

Watertown WI 53094

Jefferson County

COUNTIES SERVED Dodge Jefferson

(920) 261-8789

License Number: 135 Ownership of Agency: Proprietary Corporation			:	TOTAL NUMBER OF ADMISSIONS	14
Title 18 (Medicare) certified? Yes Title 19 (Medicaid) certified? Yes Affiliated with a hospital? No Number of unduplicated patients in 2004 =	21		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	64.3% 21.4 7.1 7.1
	VISITS PER PATIENT 29.2		5	FOTAL NUMBER OF DISCHARGES (Including Deaths)	7
Home Health Aide 13 1,392 Physical Therapy 4 107 Spch/Occ/Resp Therapy 0 0 Medical Social Service 0 0 Private Duty Nursing 0 0 Personal Care/PC RN Supv. 0 0 Other Home Health Care 0 0 Homemkr & Other Non HH 2 64	107.1 26.8 0.0 0.0 0.0 0.0 0.0 32.0		1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	42.9% 28.6 0.0 0.0 28.6
TOTAL XXXXXXX 2,176 AGE AND SEX OF PATIENTS Under 4 0.0% Medicare 4 to 34 9.5 Medicaid 35 to 54 19.0 Other Federal 55 to 64 9.5 State Funds 65 to 74 14.3 Private Insurar 75 to 84 4.8 Self Pay 85 & over 42.9 Other	85.7% 4.8 0.0 0.0		S	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses	FTES 1.0 0.0 0.3
TOTAL PATIENTS Males 33.3% Females 66.7 %	21			Licensed Practical Nurses Home Health Aides Physical Therapists	0.0 2.2 0.0
PRIMARY DIAGNOSIS Infectious Disorders 0.0% Digestive Disorders Cancer 0.0 Genitourinary Sy	ys. 4.8	REVENUE Billings \$ Disallowances	211,082 11,965	Occupational Therapists Speech Pathologists Respiratory Therapists	0.0 0.0 0.0
Diabetes 4.8 Preg. & Childbir Diseases of Blood 0.0 Arthropathies Dementia/Alzheimers 19.0 Osteopathies Psychoses/Neuroses 0.0 Perinatal Period Central Nervous Sys. 0.0 Ill-Defined Conditions	0.0 4.8 d 0.0 d. 4.8	Collections Other Total EXPENSES	199,117 0 199,117	Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff	0.0 0.0 0.0 0.0
Paralysis/CP 0.0 Fractures Cardiovascular 4.8 Wounds, Burns Stroke 0.0 Compl. of Surger Respiratory 4.8 Other Conditions		Total \$	197,656	TOTAL FTES	4.5

Hess Home HealthCOUNTIES SERVED1050 Division StreetJuneau

Mauston WI 53948

Juneau County

Monroe
Sauk

(608) 847-6161

00/ 01/ 0101						
License Number: 216 Ownership of Agency: No.	nprofit Corporation			1	TOTAL NUMBER OF ADMISSIONS	154
Title 18 (Medicare) cer Title 19 (Medicaid) cer Department of a hospita Number of unduplicated	tified? Yes tified? Yes l? Yes	154			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	16.9% 68.2 11.7 3.2
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	133
Skilled Nursing	149 1,789	12.0			, , , , , , , , , , , , , , , , , , , ,	
Home Health Aide	109 1,509	13.8			PERCENT DISCHARGES TO:	
Physical Therapy	27 346	12.8			Private Residences	85.0%
Spch/Occ/Resp Therapy	3 3	1.0			General Hospitals	0.8
Medical Social Servic	e 8 8	1.0			Nursing Homes	1.5
Private Duty Nursing	0 0	0.0			Deaths	4.5
Personal Care/PC RN S		0.0			Other	8.3
Other Home Health Car		0.0				
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 3,655	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	DODMENT COMPCE				
Under 4 0.0%	Medicare	84.4%				
4 to 34 0.6	Medicaid	6.5				
35 to 54 7.8	Other Federa					
55 to 64 9.7	State Funds	0.0			STAFFING	FTES
65 to 74 19.5	Private Insu				Administrators	1.0
75 to 84 37.7	Self Pay	0.0			Req. Nurse Supervisors	1.0
85 & over 24.7	Other	2.6			Registered Nurses	1.5
	TOTAL PATIEN	TS 154			Licensed Practical Nurses	0.0
Males 46.8% Females	53.2 %				Home Health Aides	1.5
					Physical Therapists	0.4
	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.1
Infectious Disorders	5		Billings \$	338,359	Speech Pathologists	0.0
Cancer	5.2 Genitourinary		Disallowances	6,045	Respiratory Therapists	0.0
Diabetes	7.8 Preg. & Child		Collections	332,314	Medical Social Workers	0.2
Diseases of Blood	5.2 Arthropathies		Other	1,741	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies	0.0	Total	334,055	Personal Care Workers	0.0
Psychoses/Neuroses	0.6 Perinatal Per		EXPENSES		Homemakers	0.0
Central Nervous Sys. Paralysis/CP	1.3 Ill-Defined C 0.0 Fractures	ona. 5.2 11.0	Total \$	493,533	Other Staff TOTAL FTES	1.0 6.7
Cardiovascular	24.0 Wounds, Burns		TOCAL \$	±23,333	TOTAL FIED	0.7
Stroke	1.3 Compl. of Sur					
Respiratory	6.5 Other Conditi					
Respiracory	3.5 Other condict	2.0				

The Caring Heart 4133 Courtney Street. #7B Franksville WI 53126 COUNTIES SERVED

Kenosha County

Kenosha Milwaukee Racine

(262) 835-2887

02/ 033 2007						
License Number: 1035 Ownership of Agency: In	dividual Proprietary				TOTAL NUMBER OF ADMISSIONS	48
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Yes tified? Yes tal? No	42			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	85.4% 10.4 4.2 0.0
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	32
Skilled Nursing	42 670	16.0			(including beachs)	32
Home Health Aide	6 1,068	178.0			PERCENT DISCHARGES TO:	
Physical Therapy	3 35	11.7			Private Residences	81.3%
Spch/Occ/Resp Therapy		8.0			General Hospitals	0.0
Medical Social Servic		0.0			Nursing Homes	6.3
Private Duty Nursing	0 0	0.0			Deaths	12.5
Personal Care/PC RN S	Supv. 48 2,232	46.5			Other	0.0
Other Home Health Car		0.0				
Homemkr & Other Non H	IH 5 208	41.6				
TOTAL	XXXXXXX 4,221	XXXXX				
AGE AND SEX OF PATIENTS						
Under 4 4.8%	Medicare	0.0%				
4 to 34 4.8	Medicaid	28.6				
35 to 54 21.4	Other Federa				CMA FETNIC	BBBG
55 to 64 16.7	State Funds	0.0			STAFFING	FTES
65 to 74 31.0 75 to 84 14.3	Private Insu				Administrators	1.0
75 to 84 14.3 85 & over 7.1	Self Pay Other	69.0 0.0			Reg. Nurse Supervisors Registered Nurses	0.0
85 & OVEL /.1	TOTAL PATIEN				Licensed Practical Nurses	0.0
Males 40.5% Females	59.5 %	15 42			Home Health Aides	4.8
males 40.5% remales	39.3 %				Physical Therapists	0.0
P	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders		orders 7.1%	Billings \$	179,195	Speech Pathologists	0.0
Cancer	9.5 Genitourinary		Disallowances	124,367	Respiratory Therapists	0.0
Diabetes	4.8 Preq. & Child		Collections	54,828	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies	4.8	Other	, 0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	7.1 Osteopathies	0.0	Total	54,828	Personal Care Workers	0.0
Psychoses/Neuroses	0.0 Perinatal Per	iod 0.0		•	Homemakers	0.0
Central Nervous Sys.	9.5 Ill-Defined C		EXPENSES		Other Staff	2.0
Paralysis/CP	0.0 Fractures	2.4	Total \$	320,943	TOTAL FTES	7.8
Cardiovascular	4.8 Wounds, Burns					
Stroke	7.1 Compl. of Sur					
Respiratory	11.9 Other Conditi	ons 2.4				

Page 49 COUNTIES SERVED Kenosha VNA

600 52nd Street, Suite 300 Kenosha WI 53140 Kenosha County

Kenosha Racine

62) 656-8400						
License Number: 65 Ownership of Agency: Nor		ı		כ	TOTAL NUMBER OF ADMISSIONS	481
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes	553		I	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	9.6% 60.1 10.0 20.4
	NO. OF NO. O	F VISITS PER		7	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISIT				(Including Deaths)	502
Skilled Nursing	502 5,31			_		
Home Health Aide	149 2,85			I	PERCENT DISCHARGES TO:	
Physical Therapy	252 2,86				Private Residences	73.9%
Spch/Occ/Resp Therapy Medical Social Service	57 42 e 5	1 7.4 5 1.0			General Hospitals	12.0 5.0
Private Duty Nursing		0.0			Nursing Homes Deaths	1.4
Personal Care/PC RN Su		0.0			Other	7.8
Other Home Health Care		2 1.0			001101	,
Homemkr & Other Non HH	0 F	0.0				
TOTAL	XXXXXXX 11,45	S XXXXX				
AGE AND SEX OF PATIENTS	DAMIENM DEIM	BURSEMENT SOURCE				
Under 4 1.6%	Medicare	80.2%				
4 to 34 2.9	Medicale	5.7				
35 to 54 10.5	Other Fede					
55 to 64 10.5	State Fund			\$	STAFFING	FTES
65 to 74 25.7	Private In	surance 13.9			Administrators	0.0
75 to 84 32.5	Self Pay	0.2			Reg. Nurse Supervisors	1.0
85 & over 16.3	Other	0.0			Registered Nurses	5.4
	TOTAL PATI	ENTS 560			Licensed Practical Nurses	3.0
Males 37.8% Females	62.2 %				Home Health Aides	3.7
DI	RIMARY DIAGNOSIS		REVENUE		Physical Therapists Occupational Therapists	0.0
Infectious Disorders	2.9% Digestive D	isorders 6.7%	Billings \$	1,702,676	Speech Pathologists	0.0
Cancer	5.8 Genitourina		Disallowances	120,307	Respiratory Therapists	0.0
Diabetes	4.5 Preg. & Chi		Collections	1,582,369	Medical Social Workers	0.0
Diseases of Blood	1.6 Arthropathi		Other	90,554	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathie		Total	1,672,923	Personal Care Workers	0.0
Psychoses/Neuroses	0.0 Perinatal P				Homemakers	0.0
Central Nervous Sys.	1.4 Ill-Defined		EXPENSES		Other Staff	4.0
Paralysis/CP	0.2 Fractures	5.4	Total \$	1,721,352	TOTAL FTES	17.0
Cardiovascular Stroke	13.4 Wounds, Burn					
Respiratory	1.4 Compl. of State 3.1 Other Condi					
Respiracory	J.1 Other Condi	22.1				

Page 50 COUNTIES SERVED Alliance Home Care

10220 Prairie Ridge Road Pleasant Prairie WI 53158 Kenosha Kenosha County Racine

(262) 652-4400

62) 652-4400								
License Number: 130 Ownership of Agency: No	nprofit	Corporation				•	TOTAL NUMBER OF ADMISSIONS	47
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? tified? tal?	Yes Yes No	46			,	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	2.1% 12.8 0.0 85.1
	NO. C		VISITS P	≅R			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIEN		PATIENT				(Including Deaths)	47
Skilled Nursing		46 424	9.2			_		
Home Health Aide		27 242	9.0			1	PERCENT DISCHARGES TO:	
Physical Therapy		5 15	3.0				Private Residences	0.0%
Spch/Occ/Resp Therapy		0 0	0.0				General Hospitals	0.0
Medical Social Service	е	10 15	1.5				Nursing Homes	0.0
Private Duty Nursing		0 0	0.0				Deaths Other	27.7 72.3
Personal Care/PC RN St Other Home Health Care		0 0	0.0				Other	12.3
Homemkr & Other Non H		0 0	0.0					
TOTAL	XXXXX		XXXXX					
101111	212121212	12121 050	21212121					
AGE AND SEX OF PATIENTS	PA	ATIENT REIMBUR	SEMENT SO	JRCE				
Under 4 0.0%		Medicare	7!	5.0%				
4 to 34 0.0		Medicaid		0.0				
35 to 54 17.4		Other Federal		0.0				
55 to 64 15.2		State Funds	(0.0		:	STAFFING	FTES
65 to 74 17.4		Private Insur	ance 2	2.9			Administrators	0.5
75 to 84 23.9		Self Pay		2.1			Reg. Nurse Supervisors	0.5
85 & over 26.1		Other		0.0			Registered Nurses	1.9
	_	TOTAL PATIENT	'S	48			Licensed Practical Nurses	0.3
Males 47.8% Females	52.2 %	8					Home Health Aides	1.8
T-1	DIMARK F	ATA GNOGTG			DEVENIE		Physical Therapists	0.0
Infectious Disorders		DIAGNOSIS Digestive Diso	rders 0.0	٦ 0-	REVENUE Billings \$	74 220	Occupational Therapists Speech Pathologists	0.0
Cancer		Gigestive Diso Genitourinary			Billings \$ Disallowances	74,228 4,581	Respiratory Therapists	0.0
Diabetes		Preq. & Childb			Collections	69,647	Medical Social Workers	0.6
Diseases of Blood		Arthropathies	0.0	-	Other	09,047	Other Therapeutic Staff	0.3
Dementia/Alzheimers		Osteopathies	0.0		Total	69,647	Personal Care Workers	0.0
Psychoses/Neuroses		Perinatal Peri			10001	05,047	Homemakers	0.0
Central Nervous Sys.		Ill-Defined Co			EXPENSES		Other Staff	0.8
Paralysis/CP		Fractures	2.2		Total \$	297,493	TOTAL FTES	6.6
Cardiovascular		Wounds, Burns	0.0)	·	,		
Stroke		Compl. of Surg	ery 2.3	2				
Respiratory		Other Conditio		2				

Caregivers La Crosse 1802 State Road 16 La Crosse WI 54601	La Crosse County	COUNTIES SERVED Crawford Eau Claire Juneau		
(608) 779-0900		La Crosse		
License Number: 1028 Ownership of Agency: Pr	coprietary Corporation	Monroe Trempealeau	TOTAL NUMBER OF ADMISSIONS 107	
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi	rtified? Yes tal? No		PERCENT ADMISSIONS FROM: Private Residences 56.1% General Hospitals 30.8	
Number of unduplicated	patients in 2004 = 178		Nursing Homes 11.2 Other 1.9	
SERVICES PROVIDED	NO. OF NO. OF VISITS PER PATIENTS VISITS PATIENT		TOTAL NUMBER OF DISCHARGES (Including Deaths) 87	
Skilled Nursing Home Health Aide	130 2,845 21.9 34 8,826 259.6		PERCENT DISCHARGES TO:	
Physical Therapy Spch/Occ/Resp Therapy			Private Residences 51.7% General Hospitals 8.0	
Medical Social Servic Private Duty Nursing Personal Care/PC RN S	18 1,623 90.2		Nursing Homes 23.0 Deaths 4.6 Other 12.6	
Other Home Health Car Homemkr & Other Non H	re 0 0.0		Other 12.0	
TOTAL	XXXXXXX 23,652 XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOUR	CE		
Under 4 3.9%	Medicare 2.	2%		
4 to 34 16.3	Medicaid 42.			
35 to 54 23.6	Other Federal 0.			
55 to 64 14.0	State Funds 41.		STAFFING FTES	
65 to 74 18.0	Private Insurance 13.		Administrators 0.5	
75 to 84 13.5	Self Pay 0.	-	Reg. Nurse Supervisors 5.4	
85 & over 10.7	Other 0.		Registered Nurses 2.9	
w 3 20 20 T 3	TOTAL PATIENTS 18	2	Licensed Practical Nurses 4.7	
Males 39.3% Females	60.7 %		Home Health Aides 10.1	
	DINADA DIAGNOCIA	DEVENUE	Physical Therapists 0.0	
	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists 0.0	
Infectious Disorders Cancer	1.1% Digestive Disorders 1.1%	Billings \$ 1,605,754 Disallowances 237.083		
Diabetes	1.7 Genitourinary Sys. 4.5 7.9 Preq. & Childbirth 0.6		± ± ±	
Diseases of Blood	0.6 Arthropathies 7.9	Collections 1,368,671 Other 0		
Dementia/Alzheimers	0.0 Osteopathies 0.6	Total 1,368,671	±	
Psychoses/Neuroses	3.4 Perinatal Period 1.7	10cai 1,300,071	Homemakers 7.5	
Central Nervous Sys.	7.3 Ill-Defined Cond. 5.1	EXPENSES	Other Staff 4.0	
Paralysis/CP	10.1 Fractures 2.8	Total \$ 1,293,318	TOTAL FTES 46.6	
Cardiovascular	10.7 Wounds, Burns 7.9	τουατ γ τ,255,510	1011111 111110 10.0	
Stroke	3.4 Compl. of Surgery 1.1			
Respiratory	7.3 Other Conditions 13.5			
	10.0			

Franciscan Skemp Medical Center HHS 212 South 11th Street

La Crosse WI 54601

La Crosse County

La Crosse Monroe Trempealeau

COUNTIES SERVED

(608)	791-	9790

08) 791-9790						Trempealeau Vernon			
License Number Ownership of A		nrofit	Chur	ch/Corpor	ration			TOTAL NUMBER OF ADMISSIONS	324
Title 18 (Medi Title 19 (Medi Department of Number of undu	.care) cert .caid) cert a hospital	ified? tified? l?	Y Y Y	es es es	347			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	33.6% 45.4 17.3 3.7
SERVICES PROVI	DED	NO. PATIE		NO. OF	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES	324
Skilled Nurs		PALLE	256	4,910	19.2			(Including Deaths)	324
Home Health	_		95	3,599	37.9			PERCENT DISCHARGES TO:	
Physical The			180	1,185	6.6			Private Residences	76.2%
Spch/Occ/Res			79	354	4.5			General Hospitals	3.1
Medical Soci		2	8	8	1.0			Nursing Homes	10.8
Private Duty			0	0	0.0			Deaths	2.5
Personal Car		. vqı	0	0	0.0			Other	7.4
Other Home H	ealth Care	9	0	0	0.0				
Homemkr & Ot	her Non H	I	0	0	0.0				
TOTAL		XXXX	XXXX	10,056	XXXXX				
AGE AND SEX OF	PATIENTS	P	ATIEN	T REIMBUR	SEMENT SOURCE				
Under 4	0.3%		Medi	care	59.1%				
4 to 34	5.8		Medi	caid	21.6				
35 to 54	16.4			r Federal					
55 to 64	14.7			e Funds	0.0			STAFFING	FTES
65 to 74	14.4			ate Insur				Administrators	1.0
75 to 84	28.2		Self		0.3			Reg. Nurse Supervisors	1.0
85 & over	20.2		Othe		0.9			Registered Nurses	3.9
	_ ,			L PATIENT	'S 347			Licensed Practical Nurses	0.0
Males 37.8%	Females	62.2	8					Home Health Aides	3.2
	זמ	RIMARY	DIACN	OCTC		REVENUE		Physical Therapists	2.0
Infectious D	= =			tive Disc	rders 3.5%	Billings \$	985,820	Occupational Therapists Speech Pathologists	0.0
Cancer	rsorders			ourinary		Disallowances	185,280	Respiratory Therapists	0.0
Diabetes				& Childb		Collections	800,540	Medical Social Workers	0.0
Diseases of	Blood		_	opathies	2.9	Other	000,510	Other Therapeutic Staff	0.0
Dementia/Alz				pathies	1.4	Total	800,540	Personal Care Workers	0.0
Psychoses/Ne				atal Peri			,	Homemakers	0.0
Central Nerv		1.2	I11-D	efined Co	nd. 0.0	EXPENSES		Other Staff	4.9
Paralysis/CF		1.2	Fract	ures	0.6	Total \$	1,027,818	TOTAL FTES	16.5
Cardiovascul		11.5	Wound	s, Burns	4.0	•	•		
Stroke		0.9	Compl	. of Surg	ery 8.6				
Respiratory		3.7	Other	Conditio	ns 45.0				
_									

Gundersen Lutheran Medical C 811 Monitor Street, Suite 10 La Crosse WI 54603		COUNTIES SERVED Crawford Jackson Juneau	
License Number: 1027 Ownership of Agency: Nor Title 18 (Medicare) cert Title 19 (Medicaid) cert	cified? Yes cified? Yes	La Crosse Monroe Trempealeau Vernon	TOTAL NUMBER OF ADMISSIONS 244 PERCENT ADMISSIONS FROM: Private Residences 22.1%
Department of a hospital Number of unduplicated p			General Hospitals 67.2 Nursing Homes 9.4 Other 1.2
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF VISITS PATIENTS VISITS PATIENT 233 2,328 10.0	R	TOTAL NUMBER OF DISCHARGES (Including Deaths) 259
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non He	46 498 10.8 102 378 3.7 43 160 3.7 2 19 21 1.1 0 0 0.0 apv. 0 0 0.0 6 0 0.0		PERCENT DISCHARGES TO: Private Residences 87.6% General Hospitals 0.8 Nursing Homes 4.2 Deaths 0.4 Other 6.9
AGE AND SEX OF PATIENTS Under 4 12.8% 4 to 34 7.5	PATIENT REIMBURSEMENT SO Medicare 6: Medicaid	.6% .8	
35 to 54 9.8 55 to 64 9.4 65 to 74 15.8 75 to 84 28.9 85 & over 15.8	State Funds Private Insurance 2: Self Pay Other TOTAL PATIENTS	.0 .4 .0 .4 .8 79	STAFFING FTES Administrators 1.0 Reg. Nurse Supervisors 0.0 Registered Nurses 5.0 Licensed Practical Nurses 0.0
Males 48.1% Females	51.9 % RIMARY DIAGNOSIS	REVENUE	Home Health Aides 2.1 Physical Therapists 1.2 Occupational Therapists 0.8
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	0.8% Digestive Disorders 1.8 6.4 Genitourinary Sys. 1. 1.1 Preg. & Childbirth 0.4 0.0 Arthropathies 0.5 0.0 Osteopathies 1.6 0.0 Perinatal Period 9.6 0.0 Ill-Defined Cond. 1.8 0.0 Fractures 0.7 7.5 Wounds, Burns 1.6 0.8 Compl. of Surgery 2.6 1.1 Other Conditions 62.6	Disallowances 59,668 Collections 322,536 Other 2,078 Total 324,614 EXPENSES Total \$ 1,115,561	Speech Pathologists 0.0 Respiratory Therapists 0.0 Medical Social Workers 0.7 Other Therapeutic Staff 0.0 Personal Care Workers 0.0 Homemakers 0.0 Other Staff 4.4

COUNTIES SERVED La Crosse

La Crosse WI 54601 La Crosse County

(608) 785-9723

License Number: 66 Ownership of Agency: Cou	ntv					TOTAL NUMBER OF ADMISSIONS	49
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Ye ified? Ye al? No	es	87		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	83.7% 12.2 4.1 0.0
SERVICES PROVIDED Skilled Nursing		NO. OF VISITS 2,320	VISITS PER PATIENT 35.2		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	36
Home Health Aide	42	5,842	139.1		,	PERCENT DISCHARGES TO:	
Physical Therapy	10	5,042	5.9			Private Residences	50.0%
Spch/Occ/Resp Therapy	1	15	15.0			General Hospitals	13.9
Medical Social Service		0	0.0			Nursing Homes	5.6
Private Duty Nursing	0	0	0.0			Deaths	2.8
Personal Care/PC RN Su	pv. 50	1,976	39.5			Other	27.8
Other Home Health Care	0	0	0.0				
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXXX	10,212	XXXXX				
AGE AND SEX OF PATIENTS			SEMENT SOURCE				
Under 4 3.4%	Medic		16.3%				
4 to 34 24.1	Medic		31.5				
35 to 54 19.5		Federal	0.0			ama anawa	
55 to 64 10.3 65 to 74 14.9		Funds	45.7		•	STAFFING	FTES
65 to 74 14.9 75 to 84 12.6	Self	te Insura	ance 1.1 5.4			Administrators Req. Nurse Supervisors	1.0
85 & over 14.9	Other	4	0.0			Registered Nurses	3.4
03 & OVEL 14.9		」PATIENTS				Licensed Practical Nurses	0.0
Males 32.2% Females		1111111111	, ,,,			Home Health Aides	4.5
מת	IMARY DIAGNO	NGT G		REVENUE		Physical Therapists	0.0
Infectious Disorders	0.0% Digest		ders 2.3%	Billings \$	824,578	Occupational Therapists Speech Pathologists	0.0
Cancer	2.3 Genito			Disallowances	71,192	Respiratory Therapists	0.0
Diabetes		& Childbi		Collections	753,386	Medical Social Workers	0.0
Diseases of Blood		pathies	4.6	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteop		2.3	Total	753,386	Personal Care Workers	0.0
Psychoses/Neuroses		tal Perio	od 1.1		•	Homemakers	0.0
Central Nervous Sys.	6.9 Ill-De	efined Con	nd. 3.4	EXPENSES		Other Staff	3.6
2 ,	10.3 Fractu		0.0	Total \$	703,558	TOTAL FTES	13.5
Cardiovascular	8.0 Wounds		5.7				
Stroke	_	of Surge	-				
Respiratory	2.3 Other	Condition	ıs 34.5				

Lafayette County Nursing Agency 729 Clay Street, PO Box 118 Darlington WI 53530

Lafayette County

(608) 776.	-4895
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100, 770 1055			
License Number: 68 Ownership of Agency: Co	ninty	TOTAL NUMBER OF ADMISSIONS 127	
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	rtified? Yes rtified? Yes rtal? No	PERCENT ADMISSIONS FROM: Private Residences 26.0% General Hospitals 52.8 Nursing Homes 18.9 Other 2.4	
	NO. OF NO. OF VISITS PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT	(Including Deaths) 118	
Skilled Nursing	149 1,899 12.7	(======================================	
Home Health Aide	28 821 29.3	PERCENT DISCHARGES TO:	
Physical Therapy	49 208 4.2	Private Residences 59.3%	
Spch/Occ/Resp Therapy		General Hospitals 7.6	
Medical Social Service		Nursing Homes 15.3	
Private Duty Nursing	0 0.0	Deaths 7.6	
Personal Care/PC RN S		Other 10.2	
Other Home Health Car			
Homemkr & Other Non H	IH 0 0 0.0		
TOTAL	XXXXXXX 3,474 XXXXX		
AGE AND SEX OF PATIENTS			
Under 4 0.0%	Medicare 68.1%		
4 to 34 1.9	Medicaid 15.4		
35 to 54 7.8	Other Federal 0.0		
55 to 64 8.4	State Funds 0.0	STAFFING FTES	
65 to 74 17.5	Private Insurance 10.4	Administrators 1.0	
75 to 84 35.7	Self Pay 5.5	Reg. Nurse Supervisors 0.5	
85 & over 28.6	Other 0.5	Registered Nurses 3.5	
Males 39.6% Females	TOTAL PATIENTS 182	Licensed Practical Nurses 0.0 Home Health Aides 2.0	
Males 39.6% Females	8 60.4 %	Home Health Aides 2.0 Physical Therapists 0.0	
p	RIMARY DIAGNOSIS	REVENUE Occupational Therapists 0.0	
Infectious Disorders	0.6% Digestive Disorders 0.6%	Billings \$ 267,196 Speech Pathologists 0.0	
Cancer	8.4 Genitourinary Sys. 2.6	Disallowances 29,913 Respiratory Therapists 0.0	
Diabetes	6.5 Preg. & Childbirth 0.0	Collections 237,283 Medical Social Workers 0.0	
Diseases of Blood	5.2 Arthropathies 6.5	Other 1,378 Other Therapeutic Staff 0.0	
Dementia/Alzheimers	0.0 Osteopathies 2.6	Total 238,661 Personal Care Workers 0.0	
Psychoses/Neuroses	3.2 Perinatal Period 0.0	Homemakers 0.0	
Central Nervous Sys.	1.3 Ill-Defined Cond. 3.2	EXPENSES Other Staff 2.0	
Paralysis/CP	1.3 Fractures 0.0	Total \$ 386,768 TOTAL FTES 9.0	
Cardiovascular	22.1 Wounds, Burns 0.0		
Stroke	2.6 Compl. of Surgery 1.3		
Respiratory	3.2 Other Conditions 28.6		

COUNTIES SERVED Lafayette

Langlade County Health Department 1225 Langlade Road Antigo WI 54409 La

COUNTIES SERVED Langlade

Langlade County

(715) 627-6250

License Number: 69 Ownership of Agency: Co	untv					TOTAL NUMBER OF ADMISSIONS	26
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? tified? tal?	No Yes No 2004 =	63		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	15.4% 11.5 23.1 50.0
SERVICES PROVIDED Skilled Nursing	NO. OF PATIENTS 63	NO. OF VISITS 71	VISITS PER PATIENT 1.1		1	TOTAL NUMBER OF DISCHARGES (Including Deaths)	26
Home Health Aide	0.3	7 1	0.0			PERCENT DISCHARGES TO:	
Physical Therapy	1	1	1.0			Private Residences	26.9%
Spch/Occ/Resp Therapy		0	0.0			General Hospitals	19.2
Medical Social Service		0	0.0			Nursing Homes	26.9
Private Duty Nursing	0	0	0.0			Deaths	0.0
Personal Care/PC RN S	upv. 122	10,112	82.9			Other	26.9
Other Home Health Car		0	0.0				
Homemkr & Other Non H	Н 0	0	0.0				
TOTAL	XXXXXXX	10,184	XXXXX				
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	SEMENT SOURCE				
Under 4 1.6%	Med	icare	0.0%				
4 to 34 7.9	Med	icaid	82.5				
35 to 54 4.8		er Federal					
55 to 64 7.9		te Funds	0.0		i	STAFFING	FTES
65 to 74 7.9		vate Insur				Administrators	2.0
75 to 84 28.6		f Pay	12.7			Reg. Nurse Supervisors	0.0
85 & over 41.3	Oth		0.0			Registered Nurses Licensed Practical Nurses	7.1 0.0
Males 23.8% Females	76.2 %	AL PATIENT	.'S 63			Home Health Aides	3.0
Males 23.0% remales	70.2 %					Physical Therapists	0.0
P	RIMARY DIAG	NOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Dige	stive Disc	orders 0.0%	Billings \$	236,520	Speech Pathologists	0.0
Cancer		tourinary		Disallowances	33,429	Respiratory Therapists	0.0
Diabetes		. & Childb		Collections	203,091	Medical Social Workers	0.0
Diseases of Blood	0.0 Arth	ropathies	20.6	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers		opathies	3.2	Total	203,091	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri				Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	3.0
Paralysis/CP	7.9 Frac		4.8	Total \$	456,250	TOTAL FTES	15.1
Cardiovascular		ds, Burns	1.6				
Stroke		l. of Surg r Conditio					
Respiratory	3.2 Othe	r conditte	MIS 4.8				

COUNTIES SERVED Manitowoc

Manitowoc WI 54220

Manitowoc County

(920) 683-8441

License Number: 143 Ownership of Agency: No	nnrofit Chu	rah/Corpor	ration		•	TOTAL NUMBER OF ADMISSIONS	421
Title 18 (Medicare) cer Title 19 (Medicaid) cer Department of a hospita Number of unduplicated	tified? tified? l?	Yes Yes Yes	453		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	27.3% 59.9 10.2 2.6
SERVICES PROVIDED Skilled Nursing	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT 10.3		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	411
Home Health Aide	59	1,642	27.8		,	PERCENT DISCHARGES TO:	
Physical Therapy	118	787	6.7		•	Private Residences	72.3%
Spch/Occ/Resp Therapy		283	3.5			General Hospitals	9.5
Medical Social Servic		9	1.5			Nursing Homes	5.8
Private Duty Nursing	1	260	260.0			Deaths	2.7
Personal Care/PC RN S		8,233	66.4			Other	9.7
Other Home Health Car	-	0	0.0				
Homemkr & Other Non H	Н 0	0	0.0				
TOTAL	XXXXXXX	15,478	XXXXX				
AGE AND SEX OF PATIENTS			SEMENT SOURCE				
Under 4 0.2%		licare	78.9%				
4 to 34 6.2		licaid	7.2				
35 to 54 10.2		er Federal				CHI PRING	
55 to 64 9.3		te Funds	0.0		•	STAFFING	FTES
65 to 74 14.3		vate Insur				Administrators	1.0
75 to 84 31.1 85 & over 28.7	Sel Oth	f Pay	0.7 0.0			Reg. Nurse Supervisors Registered Nurses	0.8 6.5
85 & OVEL 28.7		er 'AL PATIENT				Licensed Practical Nurses	0.5
Males 42.2% Females	57.8 %	AL FAILENI	.5 450			Home Health Aides	4.0
Marcs 42.20 Femares	37.0 8					Physical Therapists	0.5
P	RIMARY DIAG	NOSIS		REVENUE		Occupational Therapists	0.2
Infectious Disorders	1.1% Dige	stive Disc	orders 2.4%	Billings \$	1,346,642	Speech Pathologists	0.1
Cancer	7.7 Geni	tourinary	Sys. 1.8	Disallowances	147,132	Respiratory Therapists	0.0
Diabetes	4.4 Preg	r. & Childb	oirth 0.2	Collections	1,199,510	Medical Social Workers	0.0
Diseases of Blood	1.3 Arth	ropathies	4.0	Other	0	Other Therapeutic Staff	0.6
Dementia/Alzheimers	0.7 Oste		0.4	Total	1,199,510	Personal Care Workers	4.4
Psychoses/Neuroses		natal Peri				Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	2.7
Paralysis/CP	2.2 Frac		0.0	Total \$	1,281,803	TOTAL FTES	21.2
Cardiovascular	21.0 Woun		0.4				
Stroke		ol. of Surg					
Respiratory	8.2 Othe	r Conditio	ons 33.3				

COUNTIES SERVED

Manitowoc

Manitowoc WI 54220 Manitowoc County

(920) 684-7155

License Number: 1 Ownership of Agency: Proprietary Corporation	TOTAL NUMBER OF ADMISSIONS	166
Title 18 (Medicare) certified? Yes Title 19 (Medicaid) certified? Yes Affiliated with a hospital? No Number of unduplicated patients in 2004 = 138	General Hospitals 4 Nursing Homes	25.9% 47.6 3.6 22.9
NO. OF NO. OF VISITS PER SERVICES PROVIDED PATIENTS VISITS PATIENT Skilled Nursing 132 1,314 10.0	TOTAL NUMBER OF DISCHARGES (Including Deaths)	160
Home Health Aide 74 2,680 36.2	PERCENT DISCHARGES TO:	
Physical Therapy 62 582 9.4	Private Residences 6	65.0%
Spch/Occ/Resp Therapy 29 231 8.0	General Hospitals	8.1
Medical Social Service 0 0 0.0		6.3
Private Duty Nursing 0 0.0		2.5
Personal Care/PC RN Supv. 104 12,891 124.0	Other 1	18.1
Other Home Health Care 0 0.0		
Homemkr & Other Non HH 0 0 0.0 TOTAL XXXXXXX 17,698 XXXXX		
TOTAL XXXXXXX 17,698 XXXXX		
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE		
Under 4 0.0% Medicare 61.7%		
4 to 34 6.5 Medicaid 32.7		
35 to 54 4.3 Other Federal 0.6		
55 to 64 5.8 State Funds 0.0	STAFFING	FTES
65 to 74 15.9 Private Insurance 4.9	Administrators	0.5
75 to 84 37.0 Self Pay 0.0	Reg. Nurse Supervisors	0.5
85 & over 30.4 Other 0.0	Registered Nurses	1.5
TOTAL PATIENTS 162	Licensed Practical Nurses	0.0
Males 31.2% Females 68.8 %	Home Health Aides	2.4
PRIMARY DIAGNOSIS	Physical Therapists REVENUE Occupational Therapists	0.0
Infectious Disorders 0.7% Digestive Disorders 1.4%	E CONTRACTOR OF THE CONTRACTOR	0.0
Cancer 2.2 Genitourinary Sys. 3.6	Billings \$ 552,215 Speech Pathologists Disallowances 41,476 Respiratory Therapists	0.0
Diabetes 5.8 Preq. & Childbirth 0.0	Collections 510,739 Medical Social Workers	0.0
Diseases of Blood 0.0 Arthropathies 20.3	Other 5,024 Other Therapeutic Staff	0.0
Dementia/Alzheimers 3.6 Osteopathies 0.7	Total 515,763 Personal Care Workers	5.9
Psychoses/Neuroses 3.6 Perinatal Period 0.0	Homemakers	0.0
Central Nervous Sys. 5.1 Ill-Defined Cond. 12.3	EXPENSES Other Staff	2.0
Paralysis/CP 3.6 Fractures 5.1		12.6
Cardiovascular 9.4 Wounds, Burns 2.9	•	
Stroke 2.2 Compl. of Surgery 0.7		
Respiratory 5.1 Other Conditions 11.6		

Aspirus VNA Home Health Inc 520 North 32nd Avenue Wausau WI 54401 (715) 847-2600 License Number: 73 Ownership of Agency: Nor Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	Marathon County profit Corporation cified? Yes cified? Yes cal? Yes	Lincoln Marathon PERCENT ADMISSIONS FROM: Portage Private Residences General Hospitals Rusk Nursing Homes	,930 3.9% 6.5 7.7 1.9
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non Hi	4 60 15.0 apv. 257 36,447 141.8 e 0 0 0.0	PERCENT DISCHARGES TO: Private Residences 80 General Hospitals 11 Nursing Homes Deaths	0.5% 1.9 0.6 2.6 4.5
TOTAL AGE AND SEX OF PATIENTS Under 4 9.5% 4 to 34 4.3 35 to 54 11.9 55 to 64 8.0 65 to 74 15.5 75 to 84 27.9 85 & over 23.0 Males 43.7% Females	PATIENT REIMBURSEMENT SOURCE Medicare 53.9% Medicaid 19.5 Other Federal 0.0 State Funds 2.5 Private Insurance 22.1 Self Pay 1.9 Other 0.0 TOTAL PATIENTS 2,319	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Occupational Therapists Disallowances 1,283,128 Collections 6,095,732 Other 105,987 Other 105,987 Other Therapeutic Staff Total 6,201,719 Personal Care Workers Homemakers Other Staff Other Staff	TES 0.0 1.0 0.1 1.0 3.6 5.8 2.4 0.0 0.0 0.0 0.0 9.1 0.0 7.6

Marathon

(715) 842-7707

License Number: 277 Ownership of Agency: Proprieta	arv Corporation			5	TOTAL NUMBER OF ADMISSIONS	216
Title 18 (Medicare) certified? Title 19 (Medicaid) certified? Affiliated with a hospital? Number of unduplicated patient		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	33.8% 40.7 4.2 21.3		
NO. SERVICES PROVIDED PATIE Skilled Nursing		VISITS PER PATIENT 20.5		:	TOTAL NUMBER OF DISCHARGES (Including Deaths)	201
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Supv. Other Home Health Care Homemkr & Other Non HH TOTAL XXXX	44 4,385 93 979 44 3,010 0 0 1 221 19 1,929 0 0	99.7 10.5 68.4 0.0 221.0 101.5 0.0 0.0 XXXXX		1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	67.7% 20.4 4.0 0.5 7.5
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 2.6% Medicare 69.1% 4 to 34 6.7 Medicaid 20.8 35 to 54 8.7 Other Federal 0.5 55 to 64 4.1 State Funds 0.0 65 to 74 11.3 Private Insurance 6.8 75 to 84 34.4 Self Pay 2.9 85 & over 32.3 Other 0.0				S	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses	FTES 1.0 1.0 4.7
Males 30.8% Females 69.2	TOTAL PATIENTS %	207			Licensed Practical Nurses Home Health Aides Physical Therapists	0.0 7.6 0.9
Infectious Disorders 1.0% Cancer 2.6 Diabetes 2.1 Diseases of Blood 2.1 Dementia/Alzheimers 2.6 Psychoses/Neuroses 1.5 Central Nervous Sys. 4.6 Paralysis/CP 4.1 Cardiovascular 13.3 Stroke 0.5	DIAGNOSIS Digestive Disord Genitourinary Sy Preg. & Childbin Arthropathies Osteopathies Perinatal Period Ill-Defined Cond Fractures Wounds, Burns Compl. of Surger Other Conditions	ys. 2.1 rth 0.5 19.0 1.5 d 1.5 d. 9.7 13.8 3.1 ry 3.6	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	791,599 3,272 788,327 54 788,381	Occupational Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.9 0.3 0.0 0.0 0.0 2.6 0.0 2.0 20.1

COUNTIES SERVED

Marinette Marinette

(715) 735-6490

License Number: 1005 Ownership of Agency: Pro	oprietarv C	orporation			,	TOTAL NUMBER OF ADMISSIONS	40
Ownership of Agency: Proprietary Corporation Title 18 (Medicare) certified? Yes Title 19 (Medicaid) certified? Yes Affiliated with a hospital? No Number of unduplicated patients in 2004 = 98					,	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	52.5% 25.0 22.5 0.0
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	34
Skilled Nursing	57	1,195	21.0		_		
Home Health Aide	55	4,187	76.1		1	PERCENT DISCHARGES TO:	
Physical Therapy	0	0	0.0			Private Residences	55.9%
Spch/Occ/Resp Therapy	0	0	0.0			General Hospitals	11.8
Medical Social Service		0	0.0			Nursing Homes	26.5
Private Duty Nursing	4	1,048	262.0			Deaths	2.9
Personal Care/PC RN St		18,519	201.3			Other	2.9
Other Home Health Care		0 192	0.0				
Homemkr & Other Non HI	I 1 XXXXXXX	25,141	192.0 XXXXX				
TOTAL	ΛΛΛΛΛΛ	25,141	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATTE	NT RETMBIIR	SEMENT SOURCE				
Under 4 4.1%		icare	0.0%				
4 to 34 15.3		icaid	94.1				
35 to 54 7.1		er Federal					
55 to 64 14.3		te Funds	0.0		:	STAFFING	FTES
65 to 74 19.4	Pri	vate Insur	ance 5.2			Administrators	0.8
75 to 84 16.3	Sel	f Pay	0.7			Req. Nurse Supervisors	1.3
85 & over 23.5	Oth	er	0.0			Registered Nurses	0.7
TOTAL PATIENTS 135					Licensed Practical Nurses	4.5	
Males 51.0% Females	49.0 %					Home Health Aides	4.2
						Physical Therapists	0.0
	RIMARY DIAG			REVENUE		Occupational Therapists	0.0
Infectious Disorders		stive Diso		Billings \$	1,267,112	Speech Pathologists	0.0
Cancer		tourinary		Disallowances	257,974	Respiratory Therapists	0.0
Diabetes		. & Childb		Collections	1,009,138	Medical Social Workers	0.0
Diseases of Blood	0.0 Arth		3.1	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers		opathies .	5.1	Total	1,009,138	Personal Care Workers	17.4
Psychoses/Neuroses		natal Peri				Homemakers	0.2
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	1.2
Paralysis/CP	9.2 Frac		2.0	Total \$	982,716	TOTAL FTES	30.1
Cardiovascular	17.3 Woun		0.0				
Stroke		l. of Surg					
Respiratory	8.2 Otne	r Conditio	ns 23.5				

COUNTIES SERVED

Marinette

Marinette WI 54143 Marinette County

(715) 732-5670

License Number: 256 Ownership of Agency: Nor	profit Chu	rch/Corpor	ation			TOTAL NUMBER OF ADMISSIONS	335
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? cified? cal?	Yes Yes No	318			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	26.9% 54.9 16.7 1.5
SERVICES PROVIDED Skilled Nursing	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT 13.6			TOTAL NUMBER OF DISCHARGES (Including Deaths)	335
Home Health Aide	127	2,893	22.8			PERCENT DISCHARGES TO:	
Physical Therapy	104	908	8.7			Private Residences	86.3%
Spch/Occ/Resp Therapy	37	449	12.1			General Hospitals	1.8
Medical Social Service	9 0	0	0.0			Nursing Homes	6.9
Private Duty Nursing	0	0	0.0			Deaths	3.6
Personal Care/PC RN Su		1,419	22.2			Other	1.5
Other Home Health Care		0	0.0				
Homemkr & Other Non H	-	0	0.0				
TOTAL	XXXXXXX	10,005	XXXXX				
AGE AND SEX OF PATIENTS	האתרה	NT DETMOIT	SEMENT SOURCE				
Under 4 0.0%		ni keimbok icare	77.5%				
4 to 34 2.5		icaid	5.1				
35 to 54 5.7		er Federal					
55 to 64 6.3		te Funds	0.0			STAFFING	FTES
65 to 74 16.4	Pri	vate Insur	ance 6.2			Administrators	0.9
75 to 84 38.4	Sel	f Pay	11.2			Reg. Nurse Supervisors	0.9
85 & over 30.8	Oth	er -	0.0			Registered Nurses	5.7
	TOT	AL PATIENT	S 356			Licensed Practical Nurses	0.1
Males 36.8% Females	63.2 %					Home Health Aides	4.5
						Physical Therapists	0.0
	RIMARY DIAG			REVENUE		Occupational Therapists	0.0
Infectious Disorders		stive Diso		Billings \$	803,757	Speech Pathologists	0.0
Cancer Diabetes		tourinary . & Childb	2	Disallowances Collections	6,792 796,965	Respiratory Therapists Medical Social Workers	0.0
Diseases of Blood		. & Childb ropathies	7.5	Other	3,180	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.6 Oste		2.2	Total	800,145	Personal Care Workers	0.0
Psychoses/Neuroses		opachies natal Peri		10041	000,140	Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	1.2
Paralysis/CP	0.0 Frac		6.3	Total \$	797,545	TOTAL FTES	13.3
	17.9 Woun		0.9	T	, - 10		
Stroke		1. of Surg					
Respiratory		r Conditio					

COUNTIES SERVED

Adams Marquette Waushara

Marquette County

(608) 296-3811

License Number: 241 Ownership of Agency: Pro	oprietary Corporatio	n	TOTAL N	NUMBER OF ADMISSIONS 209
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No	211	Priva Gener	TADMISSIONS FROM: tte Residences 42.1% ral Hospitals 44.0 rng Homes 12.0 1.9
SERVICES PROVIDED	NO. OF NO. OF PATIENTS VISITS	VISITS PER PATIENT 31.2		TUMBER OF DISCHARGES acluding Deaths) 200
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy	185 5,776 93 5,070 95 594 58 240	51.2 54.5 6.3 4.1	Priva	C DISCHARGES TO: tte Residences 73.5% ral Hospitals 18.5
Medical Social Service Private Duty Nursing Personal Care/PC RN Su	8 14 0 0	1.8 0.0 40.6		ng Homes 3.5 4.0
Other Home Health Care Homemkr & Other Non HE TOTAL	0 0	0.0 0.0 xxxxx	001101	
AGE AND SEX OF PATIENTS Under 4 1.4% 4 to 34 3.3	Medicare Medicaid	RSEMENT SOURCE 69.3% 20.9		
35 to 54 10.4 55 to 64 6.2 65 to 74 23.7 75 to 84 32.2 85 & over 22.7	Other Federa State Funds Private Insu Self Pay Other	0.0 rance 4.0 2.2 0.9	Reg. Regis	istrators 1.0 Nurse Supervisors 0.5 stered Nurses 5.5
Males 37.9% Females	TOTAL PATIEN 62.1 %	TS 225	Home	nsed Practical Nurses 0.3 Health Aides 5.2 cal Therapists 0.5
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP	RIMARY DIAGNOSIS 1.9% Digestive Dis 5.7 Genitourinary 7.1 Preg. & Child 0.9 Arthropathies 2.8 Osteopathies 1.4 Perinatal Per 5.7 Ill-Defined C 2.4 Fractures 13.3 Wounds, Burns 7.1 Compl. of Sur 11.8 Other Conditi	Sys. 2.4 birth 0.0 11.4 0.9 riod 1.4 lond. 4.7 8.5 4.3 gery 0.9	REVENUE Billings \$ 1,061,252 Speed Disallowances 184,719 Respi Collections 876,533 Medic Other 0 Other Total 876,533 Perso Homem EXPENSES Occup	ch Pathologists 0.0 cratory Therapists 0.0 cr

Horizon Home Care and Hospic 8949 North Deerbrook Trail Brown Deer WI 53223 (414) 365-8300 License Number: 150 Ownership of Agency: Non Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	Milwaukee County nprofit Private tified? Yes tified? Yes tal? Yes	Sheboygan	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	4,888 26.4% 69.0 4.3 0.2
SERVICES PROVIDED	NO. OF NO. OF VISITS PER PATIENTS VISITS PATIENT		TOTAL NUMBER OF DISCHARGES (Including Deaths)	4,768
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non Hi	3,500 49,801 14.2 549 19,720 35.9 2,335 16,955 7.3 838 5,837 7.0 e 200 248 1.2 88 10,558 120.0 upv. 89 9,038 101.6 e 10 38 3.8		PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	91.8% 2.1 1.3 2.1 2.6
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE			
Under 4 2.8%	Medicare 60.1%			
4 to 34 5.6	Medicaid 5.7			
35 to 54 15.0	Other Federal 0.0			
55 to 64 14.6	State Funds 0.8		STAFFING	FTES
65 to 74 19.1	Private Insurance 28.9		Administrators	1.0
75 to 84 26.1	Self Pay 2.2		Reg. Nurse Supervisors	5.8
85 & over 16.8	Other 2.4		Registered Nurses	57.6
Males 40.3% Females	TOTAL PATIENTS 5,036		Licensed Practical Nurses Home Health Aides	10.1 53.4
Males 40.5% remales	39.1 %		Physical Therapists	12.9
Pl	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists	3.4
Infectious Disorders	1.1% Digestive Disorders 2.3%	Billings \$ 14,449,748	Speech Pathologists	0.2
Cancer	6.0 Genitourinary Sys. 1.9	Disallowances 2,312,844	Respiratory Therapists	0.0
Diabetes	4.6 Preg. & Childbirth 0.4	Collections 12,136,904	Medical Social Workers	0.0
Diseases of Blood	0.7 Arthropathies 1.6	Other 24,536	Other Therapeutic Staff	1.8
Dementia/Alzheimers	0.4 Osteopathies 0.8	Total 12,161,440	Personal Care Workers	6.4
Psychoses/Neuroses	1.3 Perinatal Period 1.3		Homemakers	12.1
Central Nervous Sys.	1.4 Ill-Defined Cond. 2.5	EXPENSES	Other Staff	43.6
Paralysis/CP	0.4 Fractures 0.2	Total \$ 11,829,451	TOTAL FTES	208.3
Cardiovascular	9.2 Wounds, Burns 1.0			
Stroke Respiratory	0.8 Compl. of Surgery 4.4 4.5 Other Conditions 53.4			
Keshiracory	4.5 Other Conditions 55.4			

COUNTIES SERVED

Regal Home Health Services 5600 West Brown Deer Road, Suite 107

Brown Deer WI 53223 Milwaukee County Milwaukee Waukesha

(414) 355-7801

Stroke

Respiratory

14) 355-7801						
License Number: 1032 Ownership of Agency: Lim	ited Liability Com	oany		5	TOTAL NUMBER OF ADMISSIONS	89
Title 18 (Medicare) cert: Title 19 (Medicaid) cert: Affiliated with a hospita Number of unduplicated pa	ified? Yes ified? Yes al? No	104		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 4.5 0.0 95.5
SERVICES PROVIDED	NO. OF NO. OF PATIENTS VISITS	VISITS PER PATIENT		5	FOTAL NUMBER OF DISCHARGES (Including Deaths)	45
Skilled Nursing	102 3,168	31.1				
Home Health Aide	28 837	29.9]	PERCENT DISCHARGES TO:	
Physical Therapy	44 821	18.7			Private Residences	64.4%
Spch/Occ/Resp Therapy	51 731	14.3			General Hospitals	11.1
Medical Social Service		2.0			Nursing Homes	4.4
Private Duty Nursing	0 0	0.0			Deaths	2.2
Personal Care/PC RN Sup		133.3			Other	17.8
Other Home Health Care		0.0				
Homemkr & Other Non HH TOTAL	0 0 XXXXXXX 6,094	XXXXX				
TOTAL	AAAAAA 6,094	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATIENT REIMB	JRSEMENT SOURCE				
Under 4 0.0%	Medicare	84.6%				
4 to 34 3.8	Medicaid	5.8				
35 to 54 11.5	Other Federa	al 0.0				
55 to 64 16.3	State Funds	7.7		\$	STAFFING	FTES
65 to 74 18.3	Private Ins	urance 1.0			Administrators	1.0
75 to 84 32.7	Self Pay	1.0			Reg. Nurse Supervisors	0.0
85 & over 17.3	Other	0.0			Registered Nurses	1.6
	TOTAL PATIE	NTS 104			Licensed Practical Nurses	2.0
Males 31.7% Females	68.3 %				Home Health Aides	1.7
PR'	IMARY DIAGNOSIS		REVENUE		Physical Therapists Occupational Therapists	0.6 1.0
Infectious Disorders	0.0% Digestive Dis	sorders 1.9%	Billings \$	799,171	Speech Pathologists	0.0
Cancer	1.0 Genitourinary		Disallowances	2,710	Respiratory Therapists	0.0
	23.1 Preg. & Child		Collections	796,461	Medical Social Workers	0.0
Diseases of Blood	1.0 Arthropathies		Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	2.9 Osteopathies	1.9	Total	796,461	Personal Care Workers	1.2
Psychoses/Neuroses	2.9 Perinatal Per		-	, - -	Homemakers	0.0
Central Nervous Sys.	1.0 Ill-Defined (EXPENSES		Other Staff	3.0
Paralysis/CP	1.0 Fractures	1.0	Total \$	731,576	TOTAL FTES	12.1
			•	•		
Cardiovascular	16.3 Wounds, Burns	1.9				

0.0

3.8

8.7 Compl. of Surgery 3.8 Other Conditions

COUNTIES SERVED Milwaukee

816 West National Avenue Milwaukee WI 53204

Milwaukee County

(414) 389-0371

License Number: 326 Ownership of Agency: Proprietar	ru Corporation			•	TOTAL NUMBER OF ADMISSIONS	143
Title 18 (Medicare) certified? Title 19 (Medicaid) certified? Affiliated with a hospital? Number of unduplicated patients	Yes Yes No	291		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	63.6% 24.5 0.7 11.2
NO. O SERVICES PROVIDED PATIEN Skilled Nursing		JISITS PER PATIENT 54.4		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	168
Home Health Aide	11 2,298	208.9		,	PERCENT DISCHARGES TO:	
Physical Therapy	26 181	7.0			Private Residences	54.2%
Spch/Occ/Resp Therapy	0 0	0.0			General Hospitals	32.7
Medical Social Service	0 0	0.0			Nursing Homes	3.6
Private Duty Nursing	0 0	0.0			Deaths	2.4
	259 32,991	127.4			Other	7.1
Other Home Health Care	0 0	0.0				
Homemkr & Other Non HH	7 425	60.7				
TOTAL XXXXX	XXX 50,097	XXXXX				
AGE AND SEX OF PATIENTS PA	ATIENT REIMBURSE	MENT SOURCE				
Under 4 0.0%	Medicare	7.9%				
4 to 34 7.6	Medicaid	73.9				
35 to 54 39.9	Other Federal	0.0				
55 to 64 24.1	State Funds	16.2		:	STAFFING	FTES
65 to 74 13.4	Private Insurar	nce 0.0			Administrators	1.7
75 to 84 10.7	Self Pay	0.7			Reg. Nurse Supervisors	0.3
85 & over 4.5	Other	1.4			Registered Nurses	3.7
	TOTAL PATIENTS	291			Licensed Practical Nurses	0.0
Males 37.5% Females 62.5%	%				Home Health Aides	3.1
					Physical Therapists	0.1
	DIAGNOSIS	Ja 0 00	REVENUE	1 046 001	Occupational Therapists	0.0
	Digestive Disord Genitourinary Sy		Billings \$ Disallowances	1,946,801	Speech Pathologists Respiratory Therapists	0.0
	Genicourmary Sy Preq. & Childbir		Collections	90,845 1,855,956	Medical Social Workers	0.0
	Arthropathies	8.9	Other	1,855,956	Other Therapeutic Staff	0.0
	Osteopathies	1.7	Total	1,855,956	Personal Care Workers	35.7
	Perinatal Period		10001	1,000,000	Homemakers	0.2
- 1	Ill-Defined Cond		EXPENSES		Other Staff	6.7
	Fractures	3.8	Total \$	1,816,497	TOTAL FTES	51.5
	Wounds, Burns	2.1	. т	,		
	Compl. of Surger					
Respiratory 5.2 0	Other Conditions	8.9				

Aurora Visiting Nurse Association 11333 West National Avenue	ciation of Wisconsin	COUNTIES SERVED Brown		
Milwaukee WI 53227	Milwayless County	Calumet		
MIIWaukee WI 53227	Milwaukee County			
(414) 227 2205		Dodge		
(414) 327-2295		Fond du Lac		
T ' NT 1 01		Green		10 166
License Number: 81		Jefferson	TOTAL NUMBER OF ADMISSIONS	10,166
Ownership of Agency: No		Kenosha		
Title 18 (Medicare) cer			PERCENT ADMISSIONS FROM:	_
Title 19 (Medicaid) cer		Manitowoc	Private Residences	30.7%
Affiliated with a hospi		Marquette	General Hospitals	62.3
Number of unduplicated	patients in 2004 = 10,367	Milwaukee	Nursing Homes	2.5
		Oconto	Other	4.6
		Outagamie		
	NO. OF NO. OF VISITS PER	Ozaukee	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT	Racine	(Including Deaths)	10,242
Skilled Nursing	8,425 105,616 12.5	Shawano	-	
Home Health Aide	1,727 39,571 22.9	Sheboygan	PERCENT DISCHARGES TO:	
Physical Therapy	4,515 39,203 8.7	Walworth	Private Residences	79.9%
Spch/Occ/Resp Therapy		Washington	General Hospitals	10.6
Medical Social Service		Waukesha	Nursing Homes	2.8
Private Duty Nursing	33 117 3.5	Waushara	Deaths	1.5
Personal Care/PC RN S		Winnebago	Other	5.2
Other Home Health Car		WIIIICDago	Ochici	5.2
Homemkr & Other Non H				
TOTAL	XXXXXXX 229,807 XXXXX			
IOIAL	AAAAAA 229,007 AAAAA			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE			
Under 4 6.3%	Medicare 64.4%			
4 to 34 6.5	Medicaid 12.5			
35 to 54 12.3	Other Federal 0.0			
55 to 64 12.2	State Funds 0.6		STAFFING	FTES
			D	
	Private Insurance 20.5		Administrators	2.0
75 to 84 27.5	Self Pay 1.9		Reg. Nurse Supervisors	14.0
85 & over 16.6	Other 0.0		Registered Nurses	138.7
	TOTAL PATIENTS 10,367		Licensed Practical Nurses	6.0
Males 41.5% Females	58.5 %		Home Health Aides	60.7
_			Physical Therapists	28.6
	PRIMARY DIAGNOSIS	REVENUE	Occupational Therapists	8.5
Infectious Disorders	0.5% Digestive Disorders 5.1%	Billings \$ 25,081,834	Speech Pathologists	2.1
Cancer	6.7 Genitourinary Sys. 2.8	Disallowances 392,598	Respiratory Therapists	0.0
Diabetes	4.7 Preg. & Childbirth 0.3	Collections 24,689,236	Medical Social Workers	7.3
Diseases of Blood	1.3 Arthropathies 17.7	Other 904,438	Other Therapeutic Staff	7.7
Dementia/Alzheimers	0.3 Osteopathies 0.4	Total 25,593,674	Personal Care Workers	0.0
Psychoses/Neuroses	1.6 Perinatal Period 2.7		Homemakers	5.5
Central Nervous Sys.	1.6 Ill-Defined Cond. 9.2	EXPENSES	Other Staff	44.6
Paralysis/CP	0.2 Fractures 1.9	Total \$ 26,545,685	TOTAL FTES	325.7
Cardiovascular	20.4 Wounds, Burns 2.4			
Stroke	1.1 Compl. of Surgery 8.3			
Respiratory	4.5 Other Conditions 6.3			

COUNTIES SERVED

Barry Healthcare Services 312 East Wisconsin Avenue, Suite 200

Milwaukee WI 53202 Milwaukee County Milwaukee Ozaukee

(414) 272-9990

14/ 2/2-9990							
License Number: 123 Ownership of Agency: Pro	oprietary Corpo	oration			י	TOTAL NUMBER OF ADMISSIONS	159
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	tified? Yes tified? Yes tal? No		5		I	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	56.6% 29.6 2.5 11.3
	NO. OF NO	O. OF VISI	rs per		7	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS V	ISITS PAT	IENT			(Including Deaths)	167
Skilled Nursing	196	9,198 46	5.9			3	
Home Health Aide	14	6,893 492	2.4		I	PERCENT DISCHARGES TO:	
Physical Therapy	11	69	5.3			Private Residences	38.9%
Spch/Occ/Resp Therapy	6	23	3.8			General Hospitals	22.8
Medical Social Service	e 0	0 (0.0			Nursing Homes	5.4
Private Duty Nursing	1		5.0			Deaths	15.6
Personal Care/PC RN Su		, -	9.7			Other	17.4
Other Home Health Care			0.0				
Homemkr & Other Non H		,	5.2				
TOTAL	XXXXXXX 52	2,980 XXX	XXX				
AGE AND SEX OF PATIENTS	מיד באיד ו	REIMBURSEMEN	r gottpær				
Under 4 1.0%	Medica		3.1%				
4 to 34 13.8	Medica:		56.3				
35 to 54 26.5		Federal	0.0				
55 to 64 14.8	State 1		37.9		5	STAFFING	FTES
65 to 74 20.9		e Insurance	2.2			Administrators	1.0
75 to 84 15.3	Self Pa	ay	0.0			Req. Nurse Supervisors	1.0
85 & over 7.7	Other	2	0.4			Registered Nurses	10.4
	TOTAL 1	PATIENTS	224			Licensed Practical Nurses	4.8
Males 32.7% Females	67.3 %					Home Health Aides	7.0
						Physical Therapists	0.0
	RIMARY DIAGNOS:			REVENUE		Occupational Therapists	0.0
Infectious Disorders	1.0% Digesti		0.0%	Billings \$	4,332,321	Speech Pathologists	0.0
Cancer	2.0 Genitou		3.1	Disallowances	1,238,634	Respiratory Therapists	0.0
Diabetes	5.6 Preg. &		0.0	Collections	3,093,687	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropa		27.6	Other	520,096	Other Therapeutic Staff	0.0
Dementia/Alzheimers	3.1 Osteopat		2.0	Total	3,613,783	Personal Care Workers Homemakers	48.1 0.2
Psychoses/Neuroses Central Nervous Sys.	3.6 Ill-Defi		0.0 2.6	EXPENSES		Other Staff	11.0
Paralysis/CP	11.2 Fracture		2.6 1.5	Total \$	3,378,302	TOTAL FTES	83.4
Cardiovascular	9.2 Wounds,		2.6	ıocaı ş	3,310,302	TOTAL FIED	03.4
Stroke		of Surgery	0.5				
Respiratory	4.6 Other Co		10.7				
HOSPITACOI,	1.0 001101 00	01101 010110					

Covenant Home Health and Hospice 9688 West Appleton Avenue Milwaukee WI 53225 Milwaukee County		COUNTIES SERVED Kenosha Milwaukee Ozaukee		
(414) 535-6900		Racine		
License Number: 179 Ownership of Agency: Nonprofit Corporation		Walworth Washington Waukesha	TOTAL NUMBER OF ADMISSIONS	5,744
Title 18 (Medicare) certified? Yes Title 19 (Medicaid) certified? Yes Affiliated with a hospital? No	5,397	1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	20.3% 73.1 6.2 0.4
SERVICES PROVIDED PATIENTS VISITS	ISITS PER	•	FOTAL NUMBER OF DISCHARGES (Including Deaths)	6,002
Skilled Nursing 6,036 59,801 Home Health Aide 3,591 20,886 Physical Therapy 2,932 17,739 Spch/Occ/Resp Therapy 1,235 6,460 Medical Social Service 132 276 Private Duty Nursing 6 1,691 Personal Care/PC RN Supv. 50 2,303 Other Home Health Care 0 0 Homemkr & Other Non HH 20 145 TOTAL XXXXXXXX 109,301	9.9 5.8 6.1 5.2 2.1 281.8 46.1 0.0 7.3 XXXXX	1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	77.9% 11.8 0.3 2.4 7.6
AGE AND SEX OF PATIENTS PATIENT REIMBURSE	MENT SOURCE			
Under 4 11.7% Medicare	56.7%			
4 to 34 4.9 Medicaid	13.4			
35 to 54 14.5 Other Federal	0.0			
55 to 64 13.4 State Funds	0.4	\$	STAFFING	FTES
65 to 74 15.8 Private Insuran			Administrators	1.0
75 to 84 24.3 Self Pay	0.7		Reg. Nurse Supervisors	7.6
85 & over 15.4 Other	0.0		Registered Nurses	90.6
TOTAL PATIENTS	6,397		Licensed Practical Nurses	10.7
Males 41.2% Females 58.8 %			Home Health Aides	25.0
PRIMARY DIAGNOSIS		REVENUE	Physical Therapists	18.6 5.0
Infectious Disorders 0.9% Digestive Disord	lers 3.6%	Billings \$ 16,544,656	Occupational Therapists Speech Pathologists	2.9
Cancer 10.4 Genitourinary Sy		Disallowances 4,305,826	Respiratory Therapists	0.0
Diabetes 3.5 Preg. & Childbir		Collections 12,238,830	Medical Social Workers	1.1
Diseases of Blood 0.8 Arthropathies	9.9	Other 32,595	Other Therapeutic Staff	0.0
Dementia/Alzheimers 0.1 Osteopathies	1.1	Total 12,271,425	Personal Care Workers	0.0
Psychoses/Neuroses 0.8 Perinatal Period	l 8.3	, ,	Homemakers	0.8
Central Nervous Sys. 2.0 Ill-Defined Cond	l. 5.2	EXPENSES	Other Staff	25.4
Paralysis/CP 0.0 Fractures	5.5	Total \$ 11,505,461	TOTAL FTES	188.6
Cardiovascular 17.4 Wounds, Burns	2.0	,		
Stroke 1.7 Compl. of Surger	y 9.1			
Respiratory 6.8 Other Conditions	8.3			

Milwaukee County

COUNTIES SERVED

Milwaukee Waukesha

(414) 342-7442

License Number: 147 Ownership of Agency: Pro	onrietary Cornoration		TOTAL NUMBER OF ADMISSIONS	30
Title 19 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Yes tified? Yes tal? No	66	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	70.0% 3.3 10.0 16.7
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF VISITS 53 9,500	VISITS PER PATIENT 179.2	TOTAL NUMBER OF DISCHARGES (Including Deaths)	27
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN So Other Home Health Care Homemkr & Other Non Hi	16 3,989 0 0 2 192 e 0 0 6 371 upv. 58 3,945 e 0 0	249.3 0.0 96.0 0.0 61.8 68.0 0.0	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	59.3% 0.0 3.7 14.8 22.2
AGE AND SEX OF PATIENTS Under 4 1.5% 4 to 34 16.7 35 to 54 34.8 55 to 64 19.7 65 to 74 7.6 75 to 84 12.1 85 & over 7.6	PATIENT REIMBURS: Medicare Medicaid Other Federal State Funds Private Insuran Self Pay Other TOTAL PATIENTS	EMENT SOURCE 5.9% 73.5 0.0 13.2 nce 7.4 0.0 0.0	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses	FTES 1.0 1.0 3.0 3.0
Males 40.9% Females P: Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	FIMARY DIAGNOSIS 0.0% Digestive Disord 3.0 Genitourinary St 25.8 Preg. & Childbit 0.0 Arthropathies 0.0 Osteopathies 6.1 Perinatal Period 12.1 Ill-Defined Cond 6.1 Fractures 4.5 Wounds, Burns 0.0 Compl. of Surget 6.1 Other Conditions	ys. 4.5 rth 0.0 7.6 3.0 d 0.0 d. 4.5 0.0 1.5 ry 0.0	REVENUE Billings \$ 1,305,227 Speech Pathologists Collections 713,941 Medical Social Workers Other 0 Other Therapeutic Staff Total 713,941 Personal Care Workers Homemakers Other Staff Total \$ 893,642 TOTAL FTES	9.5 0.0 0.0 0.0 0.0 0.0 0.0 1.9 0.0 1.0 21.3

Maxim Healthcare Services 3077 North Mayfair Road, Suite Milwaukee WI 53222 (414) 475-9330 License Number: 1029 Ownership of Agency: Propo	Milwaukee County		COUNTIES SERVED Dane Dodge Kenosha Milwaukee Ozaukee Racine Washington	TOTAL NUMBER OF ADMISSIONS	76
Title 18 (Medicare) certif Title 19 (Medicaid) certif	fied? Yes		Waukesha	PERCENT ADMISSIONS FROM: Private Residences	18.4%
Affiliated with a hospital Number of unduplicated pat		44		General Hospitals Nursing Homes Other	31.6 2.6 47.4
SERVICES PROVIDED I Skilled Nursing	NO. OF NO. OF PATIENTS VISITS	VISITS PER PATIENT 8.0		TOTAL NUMBER OF DISCHARGES (Including Deaths)	42
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Supo Other Home Health Care Homemkr & Other Non HH TOTAL	0 0 0 0 10 3,891 0 0 22 8,011	0.0 0.0 389.1 0.0 364.1 43.4 0.0 0.0 XXXXX		PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	9.5% 23.8 42.9 2.4 21.4
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 38.6 35 to 54 0.0 55 to 64 15.9 65 to 74 18.2 75 to 84 27.3	PATIENT REIMBURS Medicare Medicaid Other Federal State Funds Private Insura Self Pay	2.2% 52.2 0.0 19.6		STAFFING Administrators Req. Nurse Supervisors	FTES 1.0 2.0
85 & over 0.0 Males 47.7% Females 5	Other TOTAL PATIENTS 52.3 %	0.0 5 92		Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists	16.7 10.2 10.6 0.0
PRIM	MARY DIAGNOSIS		REVENUE	Occupational Therapists	0.0
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke	4.5% Digestive Disor 0.0 Genitourinary S 0.0 Preg. & Childbi 0.0 Arthropathies 0.0 Osteopathies 0.0 Perinatal Peric 0.0 Ill-Defined Con 0.0 Fractures 2.7 Wounds, Burns 0.0 Compl. of Surge 2.7 Other Condition	Sys. 0.0 irth 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	Billings \$ 1,520, Disallowances Collections 1,520, Other Total 1,520, EXPENSES Total \$ 1,835,	.762 Speech Pathologists 0 Respiratory Therapists .762 Medical Social Workers 0 Other Therapeutic Staff .762 Personal Care Workers Homemakers Other Staff	0.0 0.0 0.0 0.0 12.6 8.4 7.0 68.4

COUNTIES SERVED
Milwaukee

6014 West Congress Street Milwaukee WI 53218

Milwaukee County

(414) 464-4490

License Number: 23 Ownership of Agency: Pr	roprietary Corporatio	ın		7	TOTAL NUMBER OF ADMISSIONS	77
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	rtified? Yes rtified? Yes ital? No	213		I	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	9.1% 74.0 0.0 16.9
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF PATIENTS 185 1,297	VISITS PER PATIENT 7.0		כ	TOTAL NUMBER OF DISCHARGES (Including Deaths)	95
Home Health Aide	16 1,446	90.4		т	PERCENT DISCHARGES TO:	
Physical Therapy	11 112	10.2		-	Private Residences	37.9%
Spch/Occ/Resp Therapy		1.0			General Hospitals	14.7
Medical Social Service		0.0			Nursing Homes	2.1
Private Duty Nursing	0 0	0.0			Deaths	7.4
Personal Care/PC RN S	Supv. 396 57,277	144.6			Other	37.9
Other Home Health Car	re 0 0	0.0				
Homemkr & Other Non F	HH 12 527	43.9				
TOTAL	XXXXXXX 60,662	XXXXX				
AGE AND SEX OF PATIENTS	DATTENT DETMOT	RSEMENT SOURCE				
Under 4 0.0%	Medicare	11.3%				
4 to 34 8.5	Medicaid	61.9				
35 to 54 28.2	Other Federa					
55 to 64 17.8	State Funds	22.1		٤	STAFFING	FTES
65 to 74 12.2	Private Insu	rance 2.6			Administrators	1.0
75 to 84 21.6	Self Pay	0.0			Reg. Nurse Supervisors	0.0
85 & over 11.7	Other	2.2			Registered Nurses	3.3
	TOTAL PATIEN	TS 231			Licensed Practical Nurses	0.1
Males 27.7% Females	72.3 %				Home Health Aides	4.5
					Physical Therapists	0.0
	PRIMARY DIAGNOSIS	1 100	REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.5% Digestive Dis			3,719,621	Speech Pathologists	0.0
Cancer Diabetes	1.9 Genitourinary			1,061,608	Respiratory Therapists Medical Social Workers	0.0
Diseases of Blood	4.7 Preg. & Child 0.0 Arthropathies		Other	2,658,013 260,739	Other Therapeutic Staff	0.0
Dementia/Alzheimers	2.3 Osteopathies	0.0		2,918,752	Personal Care Workers	57.0
Psychoses/Neuroses	3.3 Perinatal Per		IOCAI	2,910,732	Homemakers	0.8
Central Nervous Sys.	1.4 Ill-Defined C		EXPENSES		Other Staff	14.6
Paralysis/CP	8.5 Fractures	3.3		3,013,512	TOTAL FTES	81.3
Cardiovascular	4.7 Wounds, Burns		*	, , - · -	-	
Stroke						
	14.6 Compl. of Sur	gery 0.0				

Midamerica Healthcare Corporation WI 811 North Hawley Road Milwaukee WI 53213 Milwa

COUNTIES SERVED

Milwaukee County

Milwaukee Waukesha

(414) 578-2961

11, 3,0 2501			
License Number: 309 Ownership of Agency: Pro	oprietary Corporation		TOTAL NUMBER OF ADMISSIONS 115
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Yes ified? Yes al? No	0	PERCENT ADMISSIONS FROM: Private Residences 13.0% General Hospitals 1.7 Nursing Homes 1.7 Other 83.5
	NO. OF NO. OF VISIT	TS PER	TOTAL NUMBER OF DISCHARGES
SERVICES PROVIDED	PATIENTS VISITS PATI		(Including Deaths) 98
Skilled Nursing		8.8	(,,,
Home Health Aide	•	4.6	PERCENT DISCHARGES TO:
Physical Therapy		1.0	Private Residences 10.2%
Spch/Occ/Resp Therapy		1.0	General Hospitals 2.0
Medical Social Service		0.0	Nursing Homes 4.1
Private Duty Nursing		0.0	Deaths 13.3
Personal Care/PC RN Su			Other 70.4
Other Home Health Care		0.0	
Homemkr & Other Non HH	H 7 1,140 162	2.9	
TOTAL	XXXXXXX 215,501 XXX	XXX	
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 11.1 35 to 54 11.8	PATIENT REIMBURSEMENT Medicare Medicaid Other Federal	T SOURCE 0.8% 86.3 0.0	
55 to 64 15.6	State Funds	12.8	STAFFING FTES
65 to 74 21.3	Private Insurance	0.0	Administrators 1.0
75 to 84 30.2	Self Pay	0.2	Reg. Nurse Supervisors 1.0
85 & over 10.0	Other	0.0	Registered Nurses 7.0
03 4 0 001 10.0	TOTAL PATIENTS	531	Licensed Practical Nurses 0.0
Males 33.6% Females		331	Home Health Aides 6.7
			Physical Therapists 0.0
PR	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists 0.0
Infectious Disorders	0.7% Digestive Disorders	0.7% Billings \$	8,672,775 Speech Pathologists 0.0
Cancer	1.8 Genitourinary Sys.	3.6 Disallowances	1,663,770 Respiratory Therapists 0.0
Diabetes	1.6 Preg. & Childbirth	0.2 Collections	7,009,005 Medical Social Workers 0.0
Diseases of Blood	1.1 Arthropathies	41.6 Other	1,820 Other Therapeutic Staff 0.0
Dementia/Alzheimers	1.1 Osteopathies	1.1 Total	7,010,825 Personal Care Workers 176.8
Psychoses/Neuroses	5.1 Perinatal Period	0.0	Homemakers 0.7
Central Nervous Sys.	3.1 Ill-Defined Cond.	4.9 EXPENSES	
Paralysis/CP	4.0 Fractures	1.1 Total \$	6,430,219 TOTAL FTES 202.3
Cardiovascular	4.9 Wounds, Burns	1.8	
Stroke	6.0 Compl. of Surgery	0.2	
Respiratory	4.7 Other Conditions	10.9	

Quality Assurance Home Health Services 8320 West Beatrice Court

Milwaukee WI 53224

Milwaukee County

(414) 36	2-03	62
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License Number: 1023					TOTAL NUMBER OF ADMISSIONS	67
Ownership of Agency: Pro Title 18 (Medicare) cert Title 19 (Medicaid) cert	tified? Yes	n			PERCENT ADMISSIONS FROM: Private Residences	31.3%
Affiliated with a hospit	tal? No				General Hospitals	23.9
Number of unduplicated p	patients in 2004 =	136			Nursing Homes Other	0.0 44.8
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED Skilled Nursing	PATIENTS VISITS 136 7,145	PATIENT 52.5			(Including Deaths)	42
Home Health Aide	50 1,984	39.7			PERCENT DISCHARGES TO:	
Physical Therapy	30 196	6.5			Private Residences	64.3%
Spch/Occ/Resp Therapy	56 585	10.4			General Hospitals	0.0
Medical Social Service		0.0			Nursing Homes	0.0
Private Duty Nursing	0 0	0.0			Deaths	9.5
Personal Care/PC RN Su	upv. 172 24,830	144.4			Other	26.2
Other Home Health Care		0.0				
Homemkr & Other Non H	·-	0.0				
TOTAL	XXXXXXX 34,740	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	DOEMENT COUPER				
Under 4 0.7%	Medicare	24.3%				
4 to 34 11.8	Medicaid	52.2				
35 to 54 27.2	Other Federa					
55 to 64 16.2	State Funds	18.4			STAFFING	FTES
65 to 74 16.9	Private Insu	rance 0.7			Administrators	2.0
75 to 84 19.9	Self Pay	0.0			Reg. Nurse Supervisors	2.0
85 & over 7.4	Other	4.4			Registered Nurses	9.0
	TOTAL PATIEN	TS 136			Licensed Practical Nurses	1.0
Males 44.9% Females	55.1 %				Home Health Aides	30.0
77	DINADA DIAGNOGIG		REVENUE		Physical Therapists	1.0
Infectious Disorders	RIMARY DIAGNOSIS 0.0% Digestive Dis	orders 0.7%	Billings \$	3,083,219	Occupational Therapists Speech Pathologists	1.0
Cancer	0.0% Digestive Dis		Disallowances	1,457,525	Respiratory Therapists	0.0
Diabetes	18.4 Preg. & Child	2	Collections	1,625,694	Medical Social Workers	0.0
Diseases of Blood	2.2 Arthropathies		Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	2.2 Osteopathies	0.0	Total	1,625,694	Personal Care Workers	33.0
Psychoses/Neuroses	3.7 Perinatal Per	iod 0.0		•	Homemakers	0.0
Central Nervous Sys.	2.2 Ill-Defined C		EXPENSES		Other Staff	5.0
Paralysis/CP	9.6 Fractures	0.0	Total \$	1,466,170	TOTAL FTES	84.0
Cardiovascular	2.9 Wounds, Burns					
Stroke	6.6 Compl. of Sur	J 1				
Respiratory	3.7 Other Conditi	ons 26.5				

COUNTIES SERVED Milwaukee

COUNTIES SERVED

5818 West Bluemound Road Milwaukee WI 53213

Milwaukee County

Milwaukee Waukesha

(414) 774-9400

14) //4-9400						
License Number: 312 Ownership of Agency: Pro	oprietary Corporatio	n		•	TOTAL NUMBER OF ADMISSIONS	4
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Yes tified? Yes tal? No	28		,	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	50.0% 0.0 25.0 25.0
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	9
Skilled Nursing	18 6,303	350.2			, , , , , , , , , , , , , , , , , , , ,	
Home Health Aide	0 0	0.0]	PERCENT DISCHARGES TO:	
Physical Therapy	0 0	0.0			Private Residences	0.0%
Spch/Occ/Resp Therapy	1 417	417.0			General Hospitals	11.1
Medical Social Service	e 0 0	0.0			Nursing Homes	22.2
Private Duty Nursing	2 446	223.0			Deaths	11.1
Personal Care/PC RN S		142.3			Other	55.6
Other Home Health Car		0.0				
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 8,589	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	DCEMENT COUDCE				
Under 4 0.0%	Medicare	0.0%				
4 to 34 28.6	Medicaid	85.7				
35 to 54 28.6	Other Federa					
55 to 64 17.9	State Funds	14.3		9	STAFFING	FTES
65 to 74 7.1	Private Insu			•	Administrators	1.0
75 to 84 14.3	Self Pay	0.0			Req. Nurse Supervisors	0.0
85 & over 3.6	Other	0.0			Registered Nurses	2.5
	TOTAL PATIEN	TS 28			Licensed Practical Nurses	2.8
Males 50.0% Females	50.0 %				Home Health Aides	0.0
					Physical Therapists	0.0
P	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Dis		Billings \$	1,182,706	Speech Pathologists	0.0
Cancer	3.6 Genitourinary		Disallowances	490,797	Respiratory Therapists	0.0
Diabetes	17.9 Preg. & Child		Collections	691,909	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies		Other	17,556	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies	0.0	Total	709,465	Personal Care Workers	2.1
Psychoses/Neuroses	3.6 Perinatal Per				Homemakers	0.0
Central Nervous Sys.			EXPENSES	660 262	Other Staff	1.1
Paralysis/CP	0.0 Fractures	0.0	Total \$	660,369	TOTAL FTES	9.4
Cardiovascular	0.0 Wounds, Burns					
Stroke	0.0 Compl. of Sur 3.6 Other Conditi					
Respiratory	3.6 Other Conditi	0115 10./				

Nursing Consultation & Care Management 3878 North Morris Boulevard

Shorewood WI 53211

Milwaukee County

COUNTIES SERVED Milwaukee Waukesha

(414) 964-8800

License Number: 225 Ownership of Agency: Proprietary Corporation	TOTAL NUMBER OF ADMISSIONS 7
Title 18 (Medicare) certified? No Title 19 (Medicaid) certified? No Affiliated with a hospital? No Number of unduplicated patients in 2004 = 17	PERCENT ADMISSIONS FROM: Private Residences 42.9% General Hospitals 28.6 Nursing Homes 14.3 Other 14.3
NO. OF NO. OF VISITS PER SERVICES PROVIDED PATIENTS VISITS PATIENT Skilled Nursing 16 192 12.0	TOTAL NUMBER OF DISCHARGES (Including Deaths) 7
Home Health Aide 0 0 0.0 Physical Therapy 0 0 0.0 Spch/Occ/Resp Therapy 0 0 0.0 Medical Social Service 0 0 0.0 Private Duty Nursing 2 550 275.0 Personal Care/PC RN Supv. 30 4,184 139.5 Other Home Health Care 0 0 0.0 Homemkr & Other Non HH 0 0 0.0 TOTAL XXXXXXX 4,926 XXXXX	PERCENT DISCHARGES TO: Private Residences 71.4% General Hospitals 0.0 Nursing Homes 0.0 Deaths 28.6 Other 0.0
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOUR Under 4 0.0% Medicare 0. 4 to 34 5.9 Medicaid 0. 35 to 54 0.0 Other Federal 0. 55 to 64 11.8 State Funds 0.	
65 to 74 11.8 Private Insurance 0. 75 to 84 11.8 Self Pay 100. 85 & over 58.8 Other 0. TOTAL PATIENTS 1 Males 23.5% Females 76.5 %	Reg. Nurse Supervisors 1.4 Registered Nurses 1.1 Licensed Practical Nurses 0.0 Home Health Aides 0.0
PRIMARY DIAGNOSIS Infectious Disorders 0.0% Digestive Disorders 0.0% Cancer 0.0 Genitourinary Sys. 0.0 Diabetes 5.9 Preg. & Childbirth 0.0 Diseases of Blood 0.0 Arthropathies 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Psychoses/Neuroses 0.0 Perinatal Period 0.0 Central Nervous Sys. 5.9 Ill-Defined Cond. 5.9 Paralysis/CP 47.1 Fractures 5.9 Cardiovascular 0.0 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 11.8 Respiratory 0.0 Other Conditions 17.6	REVENUE REVENUE Billings \$ 873,941 Speech Pathologists 0.0 Disallowances 160 Respiratory Therapists 0.0 Collections 873,781 Medical Social Workers 0.0 Other 0 Other Therapeutic Staff 0.0 Total 873,781 Personal Care Workers 13.5 Homemakers 0.0 EXPENSES Total \$ 883,859 TOTAL FTES 18.0

COUNTIES SERVED Milwaukee

Milwaukee County

(414) 475-7788

License Number: 122 Ownership of Agency: Pro	oprietary Corr	poration			•	TOTAL NUMBER OF ADMISSIONS	33
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	zified? Yes zified? Yes zal? No	s s	85		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	90.9% 9.1 0.0 0.0
SERVICES PROVIDED Skilled Nursing		NO. OF VISITS 27	VISITS PER PATIENT 3.0		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	40
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non He	2 2 0 0 0 0 1pv. 166 2	983 15 0 0 0 25,549 0 84 26,658	491.5 7.5 0.0 0.0 0.0 153.9 0.0 42.0		1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	62.5% 10.0 2.5 2.5 22.5
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 16.5 35 to 54 49.4 55 to 64 20.0 65 to 74 9.4 75 to 84 2.4 85 & over 2.4	Medica Medica Other State	are aid Federal Funds te Insura Pay	EMENT SOURCE 2.4% 96.5 0.0 1.2 nce 0.0 0.0 0.0			STAFFING Administrators Reg. Nurse Supervisors Registered Nurses	FTES 1.0 0.5 2.8
Males 49.4% Females		PATIENTS	85			Licensed Practical Nurses Home Health Aides Physical Therapists	0.0 3.9
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory		ive Disor urinary S & Childbi pathies athies tal Perio fined Con	ys. 2.4 rth 0.0 23.5 0.0 d 0.0 d. 0.0 1.2 ry 0.0	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	888,038 28,501 859,537 0 859,537	Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.0 0.0 0.0 0.0 0.0 18.3 0.1 7.0 33.4

COUNTIES SERVED

Milwaukee Milwaukee Waukesha

(414) 258-2418

Wauwatosa WI 53226

License Number: 148 Ownership of Agency: Non	nprofit Private		TOTAL NUM	BER OF ADMISSIONS 92
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Yes ified? Yes al? No	= 127	Private	DMISSIONS FROM: Residences 64.1% Hospitals 21.7 Homes 9.8 4.3
SERVICES PROVIDED Skilled Nursing	NO. OF NO. PATIENTS VISI			BER OF DISCHARGES uding Deaths) 84
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	35 5,3 44 3 17 0 30 8 apv. 26 1,2	98 154.2 47 7.9 81 4.8 0 0.0 85 29.5 04 46.3 0 0.0 0 0.0	Private	ISCHARGES TO: Residences 60.7% Hospitals 6.0 Homes 20.2 10.7 2.4
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 0.0 35 to 54 2.4 55 to 64 0.0 65 to 74 8.7 75 to 84 31.5 85 & over 57.5 Males 21.3% Females	PATIENT REI Medicare Medicaid Other Fed State Fur Private I Self Pay Other TOTAL PAT	MBURSEMENT SOURCE 59.1% 9.8 leral 0.0 ds 0.0 nsurance 1.5 29.5 0.0	Registe: Licensed	FTES trators 1.0 rse Supervisors 0.8 red Nurses 1.5 d Practical Nurses 0.3 alth Aides 19.6
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP	RIMARY DIAGNOSIS 0.0% Digestive 5.5 Genitourir 2.4 Preg. & Ct 2.4 Arthropath 4.7 Osteopathi 4.7 Perinatal 2.4 Ill-Define 0.0 Fractures 14.2 Wounds, Bu 9.4 Compl. of	ary Sys. 3.1 dildbirth 0.0 dies 16.5 des 0.0 Period 0.0 d Cond. 11.0 3.9 drns 3.1 Surgery 0.0	REVENUE Occupat: Billings \$ 614,818 Speech Disallowances 31,424 Respirate Collections 583,394 Medical Other 89,340 Other The Collections 189,340 Other The C	taff 3.0

Preferred Home Health Services

COUNTIES SERVED

9800 West Bluemound Road

Wauwatosa WI 53226

Milwaukee County

Milwaukee Waukesha

(414) 774-390)]	l
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14) //4-3901						
License Number: 278 Ownership of Agency: Lit	mited Liahility Partr	nershin		•	TOTAL NUMBER OF ADMISSIONS	229
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	tified? Yes tified? Yes tal? No	341		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	88.2% 10.9 0.0 0.9
	NO. OF NO. OF	VISITS PER		•	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	200
Skilled Nursing	121 12,502	103.3			_	
Home Health Aide	21 5,052	240.6		:	PERCENT DISCHARGES TO:	
Physical Therapy	25 225	9.0			Private Residences	81.0%
Spch/Occ/Resp Therapy		8.7			General Hospitals	12.0
Medical Social Service		0.0			Nursing Homes	2.0
Private Duty Nursing	1 138	138.0			Deaths	3.5
Personal Care/PC RN St		98.4			Other	1.5
Other Home Health Care		0.0				
Homemkr & Other Non H	,	207.9				
TOTAL	XXXXXXX 66,044	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBUR	SEMENT SOURCE				
Under 4 0.6%	Medicare	8.4%				
4 to 34 11.1	Medicaid	36.9				
35 to 54 43.7	Other Federal					
55 to 64 21.7	State Funds	9.2			STAFFING	FTES
65 to 74 12.9	Private Insur	cance 44.3			Administrators	1.0
75 to 84 7.0	Self Pay	1.1			Reg. Nurse Supervisors	0.4
85 & over 2.9	Other	0.0			Registered Nurses	4.2
	TOTAL PATIENT	TS 379			Licensed Practical Nurses	0.6
Males 27.0% Females	73.0 %				Home Health Aides	7.1
					Physical Therapists	0.0
	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Disc		Billings \$		Speech Pathologists	0.0
Cancer	1.8 Genitourinary		Disallowances	2,562,597	Respiratory Therapists	0.0
Diabetes	9.1 Preg. & Childk		Collections	2,748,690	Medical Social Workers	0.0
Diseases of Blood	0.9 Arthropathies	31.7	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers Psychoses/Neuroses	0.6 Osteopathies 5.9 Perinatal Peri	1.2 Lod 0.0	Total	2,748,690	Personal Care Workers Homemakers	45.9 0.7
Central Nervous Sys.	2.6 Ill-Defined Co		EXPENSES		Other Staff	6.7
Paralysis/CP	3.8 Fractures	1.5	Total \$	2,151,081	TOTAL FTES	66.6
Cardiovascular	5.3 Wounds, Burns	4.1	10041 7	2,131,001	1011111 11110	50.0
Stroke	5.0 Compl. of Sur					
Respiratory	2.9 Other Condition					
F = 7						

ANS Home Health Services 2711 South 84th Street West Allis WI 53227 (414) 481-9800 License Number: 306 Ownership of Agency: Pro Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	Milwaukee County Oprietary Corporation Cified? Yes Cified? Yes Cal? No	COUNTIES SERVED Dane Dodge Jefferson Milwaukee Ozaukee Walworth Washington Waukesha	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	162 79.6% 12.3 5.6 2.5
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	0 0 0.0 apv. 682 59,074 86.6 e 0 0 0.0		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	166 59.6% 25.9 6.6 6.6 1.2
AGE AND SEX OF PATIENTS Under 4 0.5% 4 to 34 13.5 35 to 54 18.3 55 to 64 15.4 65 to 74 19.4 75 to 84 26.0 85 & over 6.9 Males 37.9% Females	PATIENT REIMBURSEMENT SOURCE Medicare 0.0% Medicaid 85.2 Other Federal 1.0 State Funds 10.2 Private Insurance 1.5 Self Pay 2.2 Other 0.0 TOTAL PATIENTS 411	REVENUE Billings \$ 8,224,280 Disallowances 2,913,762 Collections 5,310,518 Other 360,749 Total 5,671,267 EXPENSES Total \$ 5,745,915	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 2.0 1.0 9.1 0.4 34.5 0.0 0.0 0.0 0.0 76.7 0.0 14.9 142.5

Aseracare Home Health 6737 West Washington, Suite West Allis WI 53214 (414) 607-0347 License Number: 1031 Ownership of Agency: Lin Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	Milwaukee mited Liability cified? Yes cified? Yes cal? No patients in 200	y Company	570	Dodge Kenosha Milwaukee Ozaukee Racine Walworth Washington Waukesha		TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	570 15.1% 15.3 54.9 14.7
SERVICES PROVIDED			SITS PER ATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	520
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non He	384 4 99 423 2 332 1 8 80 0 upv. 0	4,778 845 2,592 1,513 101 0 1	12.4 8.5 6.1 4.6 1.3 0.0 0.0 1.0 0.0 XXXXX			PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	70.4% 13.8 1.0 0.4 14.4
		, 					
AGE AND SEX OF PATIENTS Under 4 0.0%	PATIENT H Medican		ENT SOURCE 91.4%				
4 to 34 2.1	Medicai		2.6				
35 to 54 5.1	Other E	Federal	0.0				
55 to 64 7.7	State I		1.2			STAFFING	FTES
65 to 74 16.8		e Insuranc				Administrators	1.0
75 to 84 41.4 85 & over 26.8	Self Pa Other	ау	$0.4 \\ 1.4$			Reg. Nurse Supervisors Registered Nurses	1.0 5.0
03 & 0VCI 20.0		PATIENTS	570			Licensed Practical Nurses	0.0
Males 36.5% Females	63.5 %					Home Health Aides	1.5
D	RIMARY DIAGNOS			REVENUE		Physical Therapists	2.1
Infectious Disorders	0.7% Digestiv		rs 0.5%	Billings \$	1,637,309	Occupational Therapists Speech Pathologists	1.4
Cancer		rinary Sys		Disallowances	198,814	Respiratory Therapists	0.0
Diabetes	12.3 Preg. &	Childbirt		Collections	1,438,495	Medical Social Workers	0.0
Diseases of Blood	0.5 Arthropa		4.6	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.9 Osteopat 0.5 Perinata		0.5 0.2	Total	1,438,495	Personal Care Workers Homemakers	0.0
Psychoses/Neuroses Central Nervous Sys.	1.8 Ill-Defi			EXPENSE	S	Other Staff	5.0
Paralysis/CP	0.4 Fracture		1.9	Total \$	953,753	TOTAL FTES	16.9
Cardiovascular	6.5 Wounds,		3.3	·	•		
Stroke		of Surgery					
Respiratory	3.3 Other Co	onditions	24.9				

Gentiva Health Services 10909 West Greenfield Avenue	<u> </u>		Fond du Lac		
West Allis WI 53214	Milwaukee Count	У	Milwaukee		
(414) 257-1156			Ozaukee Washington Waukesha		
License Number: 237				TOTAL NUMBER OF ADMISSIONS	583
Ownership of Agency: Pro Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	rified? Yes rified? Yes ral? No	n 670		PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 28.3 0.2 71.5
					71.5
SERVICES PROVIDED	NO. OF NO. OF PATIENTS VISITS	VISITS PER PATIENT		TOTAL NUMBER OF DISCHARGES	652
Skilled Nursing	536 3,557	6.6		(Including Deaths)	652
Home Health Aide	27 2,908	107.7		PERCENT DISCHARGES TO:	
Physical Therapy	236 1,363	5.8		Private Residences	84.4%
Spch/Occ/Resp Therapy	105 575	5.5		General Hospitals	4.6
Medical Social Service	4 4	1.0		Nursing Homes	0.5
Private Duty Nursing	0 0	0.0		Deaths	1.1
Personal Care/PC RN Su		275.3		Other	9.5
Other Home Health Care		0.0			
Homemkr & Other Non HH	-	0.0 XXXXX			
TOTAL	XXXXXXX 10,059	XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBU	RSEMENT SOURCE			
Under 4 15.8%	Medicare	29.5%			
4 to 34 11.6	Medicaid	7.1			
35 to 54 20.3	Other Federa				
55 to 64 14.5	State Funds	0.0		STAFFING	FTES
65 to 74 9.9	Private Insu			Administrators	0.8
75 to 84 17.6	Self Pay	4.6		Reg. Nurse Supervisors	0.8
85 & over 10.3	Other TOTAL PATIEN	0.0 TS 764		Registered Nurses Licensed Practical Nurses	0.7 0.1
Males 40.3% Females		15 /64		Home Health Aides	4.2
rates 40.50 remates	33.7 6			Physical Therapists	0.3
PR	RIMARY DIAGNOSIS		REVENUE	Occupational Therapists	0.3
Infectious Disorders	0.3% Digestive Dis	orders 0.9%	Billings \$ 1,565,	546 Speech Pathologists	0.0
Cancer	0.9 Genitourinary		Disallowances 474,		0.0
Diabetes	1.8 Preg. & Child		Collections 1,090,		0.0
Diseases of Blood	0.3 Arthropathies		Other	0 Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.6 Osteopathies 0.7 Perinatal Per	7.9 iod 10.7	Total 1,090,	554 Personal Care Workers Homemakers	5.6 0.0
Psychoses/Neuroses Central Nervous Sys.	0.0 Ill-Defined C		EXPENSES	Other Staff	2.6
Paralysis/CP	0.0 Fractures	0.4	Total \$ 1,032,		15.4
Cardiovascular	4.3 Wounds, Burns		7 1,032,		10.1
Stroke	0.0 Compl. of Sur				
Respiratory	2.8 Other Conditi				

COUNTIES SERVED

Gentiva Health Services

COUNTIES SERVED Gentiva Health Services 10909 West Greenfield Avenue Kenosha West Allis WI 53214 Milwaukee County Milwaukee Racine (414) 257-1156 Washington Waukesha License Number: 287 TOTAL NUMBER OF ADMISSIONS 43 Ownership of Agency: Proprietary Corporation Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: No Title 19 (Medicaid) certified? No Private Residences 0.0% Affiliated with a hospital? No General Hospitals 74.4 Number of unduplicated patients in 2004 = 103 Nursing Homes 0.0 Other 25.6 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES PATIENTS VISITS SERVICES PROVIDED PATIENT (Including Deaths) 60 Skilled Nursing 19 1,345 70.8 Home Health Aide 54 3,895 72.1 PERCENT DISCHARGES TO: Physical Therapy 0 0 0.0 Private Residences 68.3% Spch/Occ/Resp Therapy Ω 0 0.0 General Hospitals 11.7 Medical Social Service Ω 0 0.0 Nursing Homes 0.0 Private Duty Nursing 0 0 0.0 Deaths 5.0 Personal Care/PC RN Supv. 5,246 52.5 Other 15.0 100 Other Home Health Care 47 595 12.7 Homemkr & Other Non HH 122 20.3 6 TOTAL XXXXXXX 11,203 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 1.9% Medicare 0.0% 4 to 34 8.7 Medicaid 0.0 35 to 54 Other Federal 15.5 0.0 55 to 64 State Funds STAFFING FTES 14.6 0.0 65 to 74 12.6 Private Insurance 55.0 Administrators 0.2 75 to 84 26.2 Req. Nurse Supervisors 0.5 Self Pav 15.8 85 & over 20.4 Other 29.2 Registered Nurses 2.1 TOTAL PATIENTS 120 Licensed Practical Nurses 2.1 Males 41.7% Females 58.3 % Home Health Aides 10.3 Physical Therapists 0.5 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.2 Infectious Disorders 1.0% Digestive Disorders 1.0% Speech Pathologists Billings 681,730 0.0 Cancer 1.0 Genitourinary Sys. 0.0 Disallowances 40,898 Respiratory Therapists 0.0 Diabetes 4.9 Preg. & Childbirth 0.0 Collections 640,832 Medical Social Workers 0.0 Diseases of Blood 1.0 Arthropathies Other Other Therapeutic Staff 15.5 0.0 Dementia/Alzheimers 4.9 Osteopathies 0.0 Total 640,832 Personal Care Workers 0.0 4.9 Perinatal Period Homemakers Psvchoses/Neuroses 0.0 0.0 Central Nervous Sys. 20.4 Ill-Defined Cond. EXPENSES Other Staff 2.1 5.8 Paralysis/CP 0.0 Fractures 1.9 Total \$ 795,013 TOTAL FTES 17.9 Cardiovascular 18.4 Wounds, Burns 0.0 Stroke 0.0 Compl. of Surgery 0.0

12.6

Respiratory

6.8 Other Conditions

Professional Home Care Services

COUNTIES SERVED

8410 West Cleveland Avenue

West Allis WI 53227

Milwaukee County

Milwaukee Waukesha

(414) 541-601	L C
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14) 541-6010						
License Number: 279 Ownership of Agency: Pro		n			TOTAL NUMBER OF ADMISSIONS	62
Title 18 (Medicare) cert				:	PERCENT ADMISSIONS FROM:	0
Title 19 (Medicaid) cert					Private Residences	56.5%
Affiliated with a hospit Number of unduplicated p		1 0 1			General Hospitals Nursing Homes	43.5 0.0
Number of unduplicated p	patients in 2004 =	101			Other	0.0
					Ochei	0.0
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	63
Skilled Nursing	53 2,848	53.7				
Home Health Aide	45 4,964	110.3			PERCENT DISCHARGES TO:	
Physical Therapy	21 528	25.1			Private Residences	47.6%
Spch/Occ/Resp Therapy		0.0			General Hospitals	19.0
Medical Social Service		0.0			Nursing Homes	12.7
Private Duty Nursing	0 0	0.0			Deaths	0.0
Personal Care/PC RN St Other Home Health Care		82.6 0.0			Other	20.6
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXXX 19,819	XXXXX				
IOIAL	AAAAAAA 13,013	222222				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	RSEMENT SOURCE				
Under 4 0.0%	Medicare	12.4%				
4 to 34 8.9	Medicaid	34.5				
35 to 54 20.8	Other Federa					
55 to 64 12.9	State Funds	35.4		1	STAFFING	FTES
65 to 74 16.8	Private Insu				Administrators	1.0
75 to 84 27.7	Self Pay	17.7			Reg. Nurse Supervisors	1.0
85 & over 12.9	Other	0.0 TS 113			Registered Nurses	2.0
Males 32.7% Females	TOTAL PATIEN 67.3 %	15 113			Licensed Practical Nurses Home Health Aides	5.2
Males 32.7% Females	67.3 %				Physical Therapists	0.1
PI	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	1.0% Digestive Dis	orders 2.0%	Billings \$	765,407	Speech Pathologists	0.0
Cancer	4.0 Genitourinary		Disallowances	19,446	Respiratory Therapists	0.0
Diabetes	7.9 Preq. & Child		Collections	745,961	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies	9.9	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	4.0 Osteopathies	0.0	Total	745,961	Personal Care Workers	5.5
Psychoses/Neuroses	3.0 Perinatal Per	iod 0.0			Homemakers	0.0
Central Nervous Sys.	5.0 Ill-Defined C		EXPENSES		Other Staff	2.0
Paralysis/CP	9.9 Fractures	4.0	Total \$	748,091	TOTAL FTES	17.0
Cardiovascular	11.9 Wounds, Burns					
G : 1						
Stroke Respiratory	8.9 Compl. of Sur 6.9 Other Conditi					

COUNTIES SERVED Monroe

Monroe County

(608) 269-8666

License Number: 83 Ownership of Agency: County					•	TOTAL NUMBER OF ADMISSIONS	48
Title 18 (Medicare) certification Title 19 (Medicaid) certification Affiliated with a hospital? Number of unduplicated pation	ed? Y	es es o 2004 =	97		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	6.3% 37.5 18.8 37.5
SERVICES PROVIDED PAT	O. OF FIENTS	NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	54
Skilled Nursing	97	2,529	26.1				
Home Health Aide	33	1,208	36.6]	PERCENT DISCHARGES TO:	2.5
Physical Therapy	7	66 87	9.4			Private Residences	37.0%
Spch/Occ/Resp Therapy Medical Social Service	2	0	43.5			General Hospitals Nursing Homes	20.4 24.1
Private Duty Nursing	0	0	0.0			Deaths	11.1
Personal Care/PC RN Supv.	8	316	39.5			Other	7.4
Other Home Health Care	0	0	0.0			Ocher	7.1
Homemkr & Other Non HH	Ö	0	0.0				
TOTAL XX	XXXXXX	4,206	XXXXX				
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE							
Under 4 1.0%	Medi	.care	60.2%				
4 to 34 0.0	Medi	caid	12.6				
35 to 54 4.1		r Federal					
55 to 64 9.3		e Funds	3.9		:	STAFFING	FTES
65 to 74 15.5		ate Insur				Administrators	1.0
75 to 84 28.9		Pay	5.8			Reg. Nurse Supervisors	1.0
85 & over 41.2	Othe		10.7			Registered Nurses	2.2
Males 35.1% Females 64		L PATIENT	S 103			Licensed Practical Nurses Home Health Aides	0.0 1.6
mates 33.1% remates 64.	. 9 %					Physical Therapists	0.0
PRIMA	RY DIAGN	osis		REVENUE		Occupational Therapists	0.0
		tive Diso	rders 3.1%	Billings \$	344,892	Speech Pathologists	0.0
		ourinary		Disallowances	62,521	Respiratory Therapists	0.0
		& Childb		Collections	282,371	Medical Social Workers	0.0
Diseases of Blood 4.3	l Arthr	opathies	8.2	Other	0	Other Therapeutic Staff	0.0
		pathies	1.0	Total	282,371	Personal Care Workers	0.2
<u> </u>		atal Peri				Homemakers	0.0
		efined Co		EXPENSES		Other Staff	1.3
<u> </u>	Fract		6.2	Total \$	353,068	TOTAL FTES	7.3
		ls, Burns	4.1				
Stroke 5.2		. of Surg					
Respiratory 10.3	o other	Conarcio	11S U.U				

The Woodlands Home Health 451 Mill Street Suring WI 54174 Oconto County Oconto Shawano License Number: 1017

Elective Nambel: 1017	
Ownership of Agency: Proprietary	Corporation
Title 18 (Medicare) certified?	Yes
Title 19 (Medicaid) certified?	Yes
Affiliated with a hospital?	No

Number of unduplicated patients in 2004 = 8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	83	1,340	16.1
Home Health Aide	36	798	22.2
Physical Therapy	20	116	5.8
Spch/Occ/Resp Therapy	11	75	6.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Sup	v. 0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,329	XXXXX

AGE AND SEX	OF PATIENTS	PATIENT REIMBURSEMENT	SOURCE
Under 4	0.0%	Medicare	95.5%
4 to 34	2.4	Medicaid	1.1
35 to 54	4.7	Other Federal	0.0
55 to 64	12.9	State Funds	0.0
65 to 74	24.7	Private Insurance	3.4
75 to 84	30.6	Self Pay	0.0
85 & over	24.7	Other	0.0
		TOTAL PATIENTS	89

Males 51.8% Females 48.2 %

	PRIMARY	DIAGNOSIS	
Infectious Disorders	0.0%	Digestive Disorders	5.9%
Cancer	2.4	Genitourinary Sys.	5.9
Diabetes	7.1	Preg. & Childbirth	0.0
Diseases of Blood	2.4	Arthropathies	14.1
Dementia/Alzheimers	1.2	Osteopathies	1.2
Psychoses/Neuroses	0.0	Perinatal Period	0.0
Central Nervous Sys.	1.2	Ill-Defined Cond.	7.1
Paralysis/CP	0.0	Fractures	5.9
Cardiovascular	14.1	Wounds, Burns	1.2
Stroke	5.9	Compl. of Surgery	0.0
Respiratory	15.3	Other Conditions	9.4

TOTAL NUMBER OF ADMISSIONS

PERCENT ADM	IISSIONS FROM:	
Private R	lesidences	13.8%
General H	ospitals (50.0
Nursing H	Iomes	33.8
Other		2.5

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 67

PERCENT DISCHARGES TO:	
Private Residences	67.2%
General Hospitals	10.4
Nursing Homes	14.9
Deaths	3.0
Other	4.5

STAFFING	FTES
Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	0.6

			HOME HOUSE HEADS	
			Physical Therapists	0.0
R	EVENUE		Occupational Therapists	0.5
Billings	\$	240,612	Speech Pathologists	0.0
Disallow	ances	120,244	Respiratory Therapists	0.0
Collecti	ons	120,368	Medical Social Workers	0.0
Other		0	Other Therapeutic Staff	0.0
Total 1		120,368	Personal Care Workers	0.0
			Homemakers	0.0
E	XPENSES		Other Staff	0.4
Total	\$	150,093	TOTAL FTES	3.5

Ministry Home Care Home Hea 1860 North Stevens Street, Rhinelander WI 54501 (715) 361-2230		COUNTIES SERVED Forest Iron Langlade Lincoln Oneida		
License Number: 253	nprofit Church/Corporation	Price Vilas	TOTAL NUMBER OF ADMISSIONS 897	
Title 18 (Medicare) cer		VIIAS	PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cer	tified? Yes		Private Residences 36.5%	
Affiliated with a hospi			General Hospitals 52.1	
Number of unduplicated	patients in 2004 = 885		Nursing Homes 10.1	
			Other 1.3	
SERVICES PROVIDED	NO. OF NO. OF VISITS PER PATIENTS VISITS PATIENT		TOTAL NUMBER OF DISCHARGES (Including Deaths) 896	
Skilled Nursing	672 6,153 9.2			
Home Health Aide	154 4,592 29.8		PERCENT DISCHARGES TO:	
Physical Therapy	466 3,884 8.3		Private Residences 76.0%	
Spch/Occ/Resp Therapy			General Hospitals 3.3	
Medical Social Service Private Duty Nursing	e 140 192 1.4 0 0 0.0		Nursing Homes 6.1 Deaths 4.1	
Personal Care/PC RN S			Other 10.4	
Other Home Health Car			001101	
Homemkr & Other Non H				
TOTAL	XXXXXXX 19,737 XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE			
Under 4 0.1%	Medicare 72.6%			
4 to 34 2.9	Medicaid 11.9			
35 to 54 7.2	Other Federal 0.0			
55 to 64 10.5	State Funds 0.0		STAFFING FTES	
65 to 74 19.3	Private Insurance 11.4		Administrators 0.0	
75 to 84 36.2	Self Pay 3.0		Reg. Nurse Supervisors 1.0	
85 & over 23.7	Other 1.1		Registered Nurses 10.1	
Males 41.8% Females	TOTAL PATIENTS 927 58.2 %		Licensed Practical Nurses 0.0 Home Health Aides 8.6	
Males 41.8% remales	50.2 6		Physical Therapists 4.2	
P	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists 1.4	
Infectious Disorders	1.4% Digestive Disorders 1.5%	Billings \$ 2,089,234		
Cancer	1.8 Genitourinary Sys. 1.0	Disallowances 5,479	Respiratory Therapists 0.0	
Diabetes	2.6 Preg. & Childbirth 0.0	Collections 2,083,755		
Diseases of Blood	1.2 Arthropathies 2.3	Other 650		
Dementia/Alzheimers	0.5 Osteopathies 0.6	Total 2,084,405	Personal Care Workers 1.3	
Psychoses/Neuroses	1.1 Perinatal Period 0.1		Homemakers 0.0	
Central Nervous Sys.	0.9 Ill-Defined Cond. 2.6 1.2 Fractures 0.6	EXPENSES	Other Staff 3.6 TOTAL FTES 30.8	
Paralysis/CP Cardiovascular	9.8 Wounds, Burns 0.8	Total \$ 2,646,305	TOTAL FTES 30.8	
Stroke	1.5 Compl. of Surgery 1.4			
Respiratory	5.2 Other Conditions 62.0			

Ozaukee County Public Health Department 121 West Main, Box 994

COUNTIES SERVED Ozaukee

Port Washington WI 53074

Ozaukee County

(262) 284-8170

02/ 201 01/0						
License Number: 89 Ownership of Agency: Cour	ntv			•	TOTAL NUMBER OF ADMISSIONS	35
Title 18 (Medicare) certifitle 19 (Medicaid) certifitle 19 (Medicaid) certifitle 19 industrial Affiliated with a hospital Number of unduplicated pages	ified? No ified? Yes al? No	= 51		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	34.3% 0.0 0.0 65.7
	NO. OF NO.	OF VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISI				(Including Deaths)	32
Skilled Nursing		74 12.2			(======================================	-
Home Health Aide	29 1,0	35.9		1	PERCENT DISCHARGES TO:	
Physical Therapy	0	0 0.0			Private Residences	31.3%
Spch/Occ/Resp Therapy	0	0 0.0			General Hospitals	34.4
Medical Social Service	0	0 0.0			Nursing Homes	21.9
Private Duty Nursing	0	0 0.0			Deaths	3.1
Personal Care/PC RN Sup	pv. 48 1,9	985 41.4			Other	9.4
Other Home Health Care	0	0 0.0				
Homemkr & Other Non HH	0	0 0.0				
TOTAL	XXXXXXX 3,5	01 XXXXX				
AGE AND SEX OF PATIENTS	DAMTENE DET	MBURSEMENT SOURCE				
Under 4 0.0%	Medicare	0.0%				
4 to 34 2.0	Medicaid	40.0				
35 to 54 13.7	Other Fed					
55 to 64 11.8	State Fun			9	STAFFING	FTES
65 to 74 7.8	Private I			•	Administrators	1.0
75 to 84 33.3	Self Pay	55.4			Req. Nurse Supervisors	1.0
85 & over 31.4	Other	0.0			Registered Nurses	1.0
	TOTAL PAT				Licensed Practical Nurses	0.0
Males 31.4% Females	68.6 %				Home Health Aides	2.0
					Physical Therapists	0.0
PRI	IMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive		Billings \$	99,033	Speech Pathologists	0.0
Cancer	3.9 Genitourin		Disallowances	30,676	Respiratory Therapists	0.0
Diabetes	5.9 Preg. & Ch		Collections	68,357	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropath		Other	0	Other Therapeutic Staff	0.0
	17.6 Osteopathi		Total	68,357	Personal Care Workers	0.0
Psychoses/Neuroses	5.9 Perinatal				Homemakers	0.0
Central Nervous Sys.	0.0 Ill-Define		EXPENSES	205 406	Other Staff	1.5
2	15.7 Fractures	0.0	Total \$	295,486	TOTAL FTES	6.5
	11.8 Wounds, Bu					
	15.7 Compl. of 3.9 Other Cond					
Respiratory	3.9 Other Cond	IILIONS 2.0				

COUNTIES SERVED Pepin

Pepin County

(715) 672-5961

License Number: 90 Ownership of Agency: County	TOTAL NUMBER OF ADMISSIONS 100
Title 18 (Medicare) certified? Yes Title 19 (Medicaid) certified? Yes Affiliated with a hospital? No Number of unduplicated patients in 2004 = 124	PERCENT ADMISSIONS FROM: Private Residences 45.0% General Hospitals 23.0 Nursing Homes 20.0 Other 12.0
NO. OF NO. OF VISITS PER SERVICES PROVIDED PATIENTS VISITS PATIENT Skilled Nursing 97 806 8.3	TOTAL NUMBER OF DISCHARGES (Including Deaths) 105
Home Health Aide 20 298 14.9	PERCENT DISCHARGES TO:
Physical Therapy 6 44 7.3	Private Residences 48.6%
Spch/Occ/Resp Therapy 3 18 6.0	General Hospitals 12.4
Medical Social Service 0 0 0.0	Nursing Homes 18.1
Private Duty Nursing 0 0.0	Deaths 3.8
Personal Care/PC RN Supv. 104 4,295 41.3	Other 17.1
Other Home Health Care 0 0.0	
Homemkr & Other Non HH 68 2,689 39.5	
TOTAL XXXXXXX 8,150 XXXXX	
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE	
Under 4 0.8% Medicare 17.4%	
4 to 34 2.4 Medicaid 38.3	
35 to 54 10.5 Other Federal 2.0	
55 to 64 8.1 State Funds 0.0	STAFFING FTES
65 to 74 20.2 Private Insurance 2.7	Administrators 1.0
75 to 84 34.7 Self Pay 14.8	Reg. Nurse Supervisors 1.0
85 & over 23.4 Other 24.8	Registered Nurses 1.4
TOTAL PATIENTS 149	Licensed Practical Nurses 0.0
Males 32.3% Females 67.7 %	Home Health Aides 0.6
PRIMARY DIAGNOSIS	Physical Therapists 0.0 REVENUE Occupational Therapists 0.0
Infectious Disorders 0.0% Digestive Disorders 1.6%	Billings \$ 334,619 Speech Pathologists 0.0
Cancer 1.6 Genitourinary Sys. 4.8	Disallowances 60,842 Respiratory Therapists 0.0
Diabetes 9.7 Preg. & Childbirth 0.0	Collections 273,777 Medical Social Workers 0.0
Diseases of Blood 1.6 Arthropathies 13.7	Other 0 Other Therapeutic Staff 0.0
Dementia/Alzheimers 1.6 Osteopathies 0.8	Total 273,777 Personal Care Workers 5.3
Psychoses/Neuroses 5.6 Perinatal Period 0.0	Homemakers 4.0
Central Nervous Sys. 2.4 Ill-Defined Cond. 1.6	EXPENSES Other Staff 1.8
Paralysis/CP 1.6 Fractures 8.1	Total \$ 345,975 TOTAL FTES 15.1
Cardiovascular 17.7 Wounds, Burns 0.0	
Stroke 10.5 Compl. of Surgery 0.8	
Respiratory 4.0 Other Conditions 12.1	

Page 90 COUNTIES SERVED Pierce

Pierce County Home Care 412 West Kinne Street, Box 238 Ellsworth WI 54011 Pierce County

(715) 273-6756

13) 2/3-0/30							
License Number: 91 Ownership of Agency: Co	intv					TOTAL NUMBER OF ADMISSIONS	58
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	tified? You tified? You tal? You tal?	-	68		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	43.1% 27.6 24.1 5.2
	NO. OF	NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	59
Skilled Nursing	68	1,116	16.4			_	
Home Health Aide	33	464	14.1		:	PERCENT DISCHARGES TO:	
Physical Therapy	10	34	3.4			Private Residences	59.3%
Spch/Occ/Resp Therapy		7	3.5			General Hospitals	15.3
Medical Social Service		0	0.0			Nursing Homes	18.6
Private Duty Nursing	0	0	0.0			Deaths	3.4
Personal Care/PC RN St		1,344	42.0			Other	3.4
Other Home Health Care Homemkr & Other Non Hi		0	0.0				
TOTAL	XXXXXXX	2,965	XXXXX				
IOIAL	ΛΛΛΛΛΛ	2,965	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATIEN	T REIMBUR	SEMENT SOURCE				
Under 4 1.5%	Medi	care	58.2%				
4 to 34 0.0	Medi	caid	26.6				
35 to 54 5.9		r Federal	0.0				
55 to 64 13.2	Stat	e Funds	0.0		1	STAFFING	FTES
65 to 74 16.2	Priv	ate Insur				Administrators	1.0
75 to 84 44.1	Self	4	2.5			Reg. Nurse Supervisors	0.0
85 & over 19.1	Othe		3.8			Registered Nurses	2.0
		L PATIENT	'S 79			Licensed Practical Nurses	0.0
Males 45.6% Females	54.4 %					Home Health Aides	0.9
ום	RIMARY DIAGN	OGTG		REVENUE		Physical Therapists Occupational Therapists	0.0
Infectious Disorders	2.9% Diges		rders 5.9%	Billings \$	278,555	Speech Pathologists	0.0
Cancer	4.4 Genit			Disallowances	97,874	Respiratory Therapists	0.0
Diabetes	14.7 Preq.		2	Collections	180,681	Medical Social Workers	0.0
Diseases of Blood	2.9 Arthr		4.4	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	1.5 Osteo		0.0	Total	180,681	Personal Care Workers	1.6
Psychoses/Neuroses	1.5 Perin		od 0.0		•	Homemakers	0.0
Central Nervous Sys.	4.4 Ill-D	efined Co	nd. 11.8	EXPENSES		Other Staff	1.4
Paralysis/CP	1.5 Fract		8.8	Total \$	292,018	TOTAL FTES	6.9
Cardiovascular	10.3 Wound		2.9				
Stroke	0.0 Compl						
Respiratory	7.4 Other	Conditio	ns 5.9				

Spring Valley Home Health Services W500 State Road 29

Spring Valley WI 54767

Pierce County

COUNTIES SERVED Dunn Pierce St. Croix

(715

715) 778-5545							
License Number: 349 Ownership of Agency: Cit	ΣV					TOTAL NUMBER OF ADMISSIONS	39
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? National initial initia initial initial initial initial initial initial initial initial	No No No 2004 =	128			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	56.4% 10.3 17.9 15.4
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	28
Skilled Nursing	7	117	16.7				
Home Health Aide	3	138	46.0			PERCENT DISCHARGES TO:	
Physical Therapy	0	0	0.0			Private Residences	17.9%
Spch/Occ/Resp Therapy	0	0	0.0			General Hospitals	3.6
Medical Social Service		0	0.0			Nursing Homes	60.7
Private Duty Nursing	0	0	0.0			Deaths	3.6
Personal Care/PC RN Su		13,376	99.8			Other	14.3
Other Home Health Care		255	25.5 75.8				
Homemkr & Other Non HH	I 95 XXXXXXX	7,204 21,090	XXXXX				
IOIAL	ΛΛΛΛΛΛ	21,090	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATIEN	NT REIMBUR	RSEMENT SOURCE				
Under 4 0.0%		icare	0.0%				
4 to 34 22.7	Medi	icaid	33.1				
35 to 54 10.2		er Federal	57.1				
55 to 64 7.8	Stat	te Funds	0.0			STAFFING	FTES
65 to 74 12.5	Priv	vate Insui	rance 1.8			Administrators	1.0
75 to 84 29.7	Self	f Pay	8.0			Reg. Nurse Supervisors	1.0
85 & over 17.2	Othe	er	0.0			Registered Nurses	1.5
	TOTA	AL PATIENT	TS 163			Licensed Practical Nurses	0.0
Males 38.3% Females	61.7 %					Home Health Aides	0.0
						Physical Therapists	0.0
	RIMARY DIAG			REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Diges			Billings \$	1,457,379	Speech Pathologists	0.0
Cancer	0.0 Genit			Disallowances	363,841	Respiratory Therapists	0.0
Diabetes	2.3 Preg			Collections	1,093,538	Medical Social Workers	0.0
Diseases of Blood	0.0 Arth		3.1	Other	1 002 520	Other Therapeutic Staff	0.0
Dementia/Alzheimers Psychoses/Neuroses	5.5 Osteo	-	23.4 Lod 0.8	Total	1,093,538	Personal Care Workers Homemakers	32.1 4.7
Central Nervous Sys.	6.3 Ill-I			EXPENSES		Other Staff	2.1
Paralysis/CP	8.6 Fract		1.6		1,071,815	TOTAL FTES	42.5
Cardiovascular	8.6 Wound		3.9	ıocaı ş	1,0/1,013	IOIVI LIES	44.5
Stroke	7.8 Comp						
Respiratory	7.0 Other	-	-				
Respiratory	, . o ociici	L COMMICTO	10.2				

COUNTIES SERVED Polk

Polk County

Polk County Home Care Program 100 Polk County Plaza, Suite 180 Balsam Lake WI 54810

(715) 485-8530

License Number: 92		TOTAL NUMBER OF ADMISSIONS	277
Ownership of Agency: Con	unty	TOTAL NUMBER OF ADMISSIONS	211
Title 18 (Medicare) cert	tified? Yes	PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert			20.9% 56.3
Affiliated with a hospit Number of unduplicated		±	20.9
Number of undupfiedeed p	pacienes in 2001 - 515	Other	1.8
	NO. OF NO. OF VISITS PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT	(Including Deaths)	283
Skilled Nursing	293 3,766 12.9 103 1,884 18.3	PERCENT DISCHARGES TO:	
Home Health Aide Physical Therapy	103 1,884 18.3 175 975 5.6		65.0%
Spch/Occ/Resp Therapy		General Hospitals	5.7
Medical Social Service		<u>-</u>	18.4
Private Duty Nursing	0 0 0.0	Deaths	5.3
Personal Care/PC RN Su	upv. 196 4,993 25.5	Other	5.7
Other Home Health Care	e 0 0.0		
Homemkr & Other Non H			
TOTAL	XXXXXXX 11,666 XXXXXX		
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE		
Under 4 0.3%	Medicare 50.1%		
4 to 34 1.7	Medicaid 21.1		
35 to 54 7.3	Other Federal 0.0		
55 to 64 11.7	State Funds 0.0	STAFFING	FTES
65 to 74 18.4	Private Insurance 9.0	Administrators	0.0
75 to 84 33.2	Self Pay 13.2	Reg. Nurse Supervisors	1.0
85 & over 27.4	Other 6.6	Registered Nurses	6.6
Males 37.3% Females	TOTAL PATIENTS 379	Licensed Practical Nurses Home Health Aides	1.8
Males 37.3% Females	62.7 %	Physical Therapists	0.0
Pi	RIMARY DIAGNOSIS	REVENUE Occupational Therapists	0.0
Infectious Disorders	0.9% Digestive Disorders 2.0%	Billings \$ 1,079,967 Speech Pathologists	0.0
Cancer	7.3 Genitourinary Sys. 1.5	Disallowances 259,624 Respiratory Therapists	0.0
Diabetes	6.1 Preg. & Childbirth 0.0	Collections 820,343 Medical Social Workers	0.0
Diseases of Blood	1.5 Arthropathies 15.7	Other 1,618 Other Therapeutic Staff	0.0
Dementia/Alzheimers	2.0 Osteopathies 1.2	Total 821,961 Personal Care Workers	4.1
Psychoses/Neuroses	1.7 Perinatal Period 0.3	Homemakers	0.0
Central Nervous Sys.	1.5 Ill-Defined Cond. 11.1	EXPENSES Other Staff	3.9
Paralysis/CP Cardiovascular	1.5 Fractures 1.5 20.1 Wounds, Burns 1.7	Total \$ 1,301,634 TOTAL FTES	20.3
Stroke	1.7 Compl. of Surgery 6.4		
Respiratory	6.4 Other Conditions 7.9		
E 1			

Community Health Resources			COUNTIES SERVED		
1133 South 4th Avenue, Box 1	_		Ashland		
Park Falls WI 54552	Price County		Bayfield		
			Price		
(715) 762-4600			Sawyer		
			Vilas		
License Number: 27				TOTAL NUMBER OF ADMISSIONS	85
Ownership of Agency: Pro		1			
Title 18 (Medicare) cert				PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert				Private Residences	22.4%
Affiliated with a hospit		110		General Hospitals	56.5
Number of unduplicated p	patients in 2004 =	117		Nursing Homes	17.6
				Other	3.5
	NO. OF NO. OF	VISITS PER		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT		(Including Deaths)	83
Skilled Nursing	107 2,931	27.4		(Including Deachs)	03
Home Health Aide	39 9,315	238.8		PERCENT DISCHARGES TO:	
Physical Therapy	21 81	3.9		Private Residences	36.1%
Spch/Occ/Resp Therapy	3 6	2.0		General Hospitals	49.4
Medical Social Service		0.0		Nursing Homes	2.4
Private Duty Nursing	0 0	0.0		Deaths	3.6
Personal Care/PC RN Su	ipv. 74 12,027	162.5		Other	8.4
Other Home Health Care		0.0			
Homemkr & Other Non H	0 0	0.0			
TOTAL	XXXXXXX 24,360	XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBUR				
Under 4 0.0%	Medicare	30.3%			
4 to 34 8.5	Medicaid	50.0			
35 to 54 14.5 55 to 64 12.8	Other Federal State Funds	0.0		STAFFING	FTES
55 to 64 12.8 65 to 74 15.4	Private Insur			Administrators	1.0
75 to 84 17.9	Self Pay	9.8			0.0
85 & over 30.8	Other	0.0		Reg. Nurse Supervisors Registered Nurses	3.3
65 & OVEL 30.6	TOTAL PATIENT			Licensed Practical Nurses	0.1
Males 39.3% Females		.5 152		Home Health Aides	7.8
rates 33.30 Temates	00.7 0			Physical Therapists	0.0
PI	RIMARY DIAGNOSIS		REVENUE	Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Disc	orders 5.1%	Billings \$ 1,350,27		0.0
Cancer	4.3 Genitourinary		Disallowances 544,38	Respiratory Therapists	0.0
Diabetes	7.7 Preg. & Childh	oirth 0.0	Collections 805,88	B Medical Social Workers	0.0
Diseases of Blood	1.7 Arthropathies	3.4	Other	Other Therapeutic Staff	0.0
Dementia/Alzheimers	5.1 Osteopathies	2.6	Total 805,888	B Personal Care Workers	7.7
Psychoses/Neuroses	1.7 Perinatal Peri	od 0.0		Homemakers	0.0
Central Nervous Sys.	4.3 Ill-Defined Co		EXPENSES	Other Staff	4.4
Paralysis/CP	2.6 Fractures	5.1	Total \$ 879,03	O TOTAL FTES	24.3
Cardiovascular	17.1 Wounds, Burns	8.5			
Stroke	4.3 Compl. of Surg				
Respiratory	5.1 Other Condition	ons 11.1			

COUNTIES SERVED

Community Health Resources

Supportive Home Services PO Box 450, 1181 North 4th F Park Falls WI 54552 (715) 762-3200 License Number: 202	Price County	COUNTIES SERVED Ashland Oneida Price Rusk Sawyer Vilas	TOTAL NUMBER OF ADMISSIONS	106
Ownership of Agency: Pro Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No		General Hospitals Nursing Homes	12.3% 67.0 7.5 13.2
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non He	0 0 0. apv. 80 6,682 83. e 0 0 0.	NT 2 1 4 5 0 0 5 0	General Hospitals Nursing Homes Deaths	108 59.3% 9.3 11.1 4.6 15.7
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses	RIMARY DIAGNOSIS 0.7% Digestive Disorders 5.1 Genitourinary Sys. 11.6 Preg. & Childbirth 0.0 Arthropathies 1 2.9 Osteopathies 4.3 Perinatal Period	62.1% 26.4 0.0 0.0 7.5 4.0 0.0 174 REVENUE 2.9% Billings \$ 3.6 Disallowances Collections 3.8 Other 5.1 Total 0.0	Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists 760,837 Speech Pathologists 108,363 Respiratory Therapists 652,474 Medical Social Workers 1,713 Other Therapeutic Staff 654,187 Personal Care Workers Homemakers	FTES 1.0 1.0 3.1 0.0 2.9 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0
Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	0.7 Fractures 15.2 Wounds, Burns 5.8 Compl. of Surgery	6.5 EXPENSES 5.8 Total \$ 2.2 0.0 5.8	Other Staff 655,005 TOTAL FTES	3.7 14.6

Flambeau Home Health and Ho 133 North Lake Avenue Phillips WI 54555 (715) 339-4371 License Number: 238	spice Price County		COUNTIES SERVED Ashland Iron Price Sawyer Vilas		TOTAL NUMBER OF ADMISSIONS	193
Ownership of Agency: No Title 18 (Medicare) cer Title 19 (Medicaid) cer Department of a hospita Number of unduplicated	tified? Yes tified? Yes l? Yes	217			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	34.7% 54.9 10.4 0.0
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Servic Private Duty Nursing Personal Care/PC RN S Other Home Health Car Homemkr & Other Non H	e 22 64 0 0 upv. 58 3,170 e 0 0	VISITS PER PATIENT 11.5 25.9 5.8 7.4 2.9 0.0 54.7 0.0 113.8 XXXXX			TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	187 50.3% 6.4 10.2 1.1 32.1
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 3.7 35 to 54 4.1 55 to 64 11.5 65 to 74 18.9 75 to 84 38.7 85 & over 23.0 Males 33.2% Females Paralysis/CP Cardiovascular Stroke Respiratory	Medicare Medicaid Other Federal State Funds Private Insur Self Pay Other TOTAL PATIEN	65.9% 21.2 0.0 0.0 cance 7.1 3.5 2.2 Sorders 0.9% Sys. 1.4 oirth 0.0 14.7 1.4 iod 0.0 ond. 6.5 2.3 2.8 gery 2.3	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	599,584 149,196 450,388 0 450,388	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 0.8 1.5 5.0 0.0 2.2 0.0 0.0 0.0 0.5 0.0 0.7 0.0 2.1 12.8

Gentiva Health Services 1300 South Green Bay Road, S Racine WI 53406	Suite 200 Racine County	COUNTIES SERVED Kenosha Milwaukee Racine	
(262) 636-9036		Walworth	
License Number: 3 Ownership of Agency: Pro	oprietary Corporation	Waukesha	TOTAL NUMBER OF ADMISSIONS 513
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	rified? Yes rified? Yes ral? No		PERCENT ADMISSIONS FROM: Private Residences 0.0% General Hospitals 86.0 Nursing Homes 0.0 Other 14.0
SERVICES PROVIDED	NO. OF NO. OF VISITS PER PATIENTS VISITS PATIENT		TOTAL NUMBER OF DISCHARGES (Including Deaths) 514
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non He	0 0 0.0 apv. 6 2,670 445.0 e 0 0 0.0		PERCENT DISCHARGES TO: Private Residences 97.1% General Hospitals 0.6 Nursing Homes 0.0 Deaths 0.8 Other 1.6
AGE AND SEX OF PATIENTS Under 4 3.1%	PATIENT REIMBURSEMENT SOURCE Medicare 49.3		
4 to 34 5.7 35 to 54 18.9 55 to 64 16.5 65 to 74 20.0 75 to 84 23.7 85 & over 12.1	Medicaid 9.6 Other Federal 0.0 State Funds 0.0 Private Insurance 36.8 Self Pay 4.2 Other 0.0		STAFFING FTES Administrators 1.0 Reg. Nurse Supervisors 1.0 Registered Nurses 3.8
Males 46.6% Females	TOTAL PATIENTS 614		Licensed Practical Nurses 4.4 Home Health Aides 8.4 Physical Therapists 0.7
PF	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists 0.1
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	0.7% Digestive Disorders 0.7% 0.6 Genitourinary Sys. 0.9 1.8 Preg. & Childbirth 0.0 0.4 Arthropathies 5.9 0.2 Osteopathies 0.0 2 Perinatal Period 1.8 1.8 Ill-Defined Cond. 6.2 0.0 Fractures 2.9 5.7 Wounds, Burns 0.0 0.0 Compl. of Surgery 4.8 1.8 Other Conditions 63.5	Billings \$ 1,941,457 Disallowances 717,487 Collections 1,223,970 Other 0 Total 1,223,970 EXPENSES Total \$ 1,147,055	Speech Pathologists 0.0 Respiratory Therapists 0.0 Medical Social Workers 0.0 Other Therapeutic Staff 0.0 Personal Care Workers 0.0 Homemakers 0.0 Other Staff 2.0

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SAI Home Health Care COUNTIES SERVED 5200 Washington Avenue, Suite 227 Kenosha Racine WI 53406 Racine County Racine Walworth (262) 632-5886 License Number: 305 TOTAL NUMBER OF ADMISSIONS 266 Ownership of Agency: Nonprofit Private Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 10.2% Affiliated with a hospital? General Hospitals 20.3 No Number of unduplicated patients in 2004 = 317 Nursing Homes 9.8 Other 59.8 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES VISITS SERVICES PROVIDED PATIENTS PATIENT (Including Deaths) 304 Skilled Nursing 189 5,379 28.5 Home Health Aide 78 6,667 85.5 PERCENT DISCHARGES TO: Physical Therapy 135 2,144 15.9 Private Residences 46.7% Spch/Occ/Resp Therapy 51 531 10.4 General Hospitals 7.6 Medical Social Service Ω 0.0 Nursing Homes 5.3 0 Private Duty Nursing 0 0 0.0 Deaths 6.3 Personal Care/PC RN Supv. 2 11 5.5 Other 34.2 Other Home Health Care Ω Ω 0.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 14,732 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 0.0% Medicare 47.0% 4 to 34 9.1 Medicaid 36.3 35 to 54 Other Federal 24.6 0.0 55 to 64 STAFFING FTES 12.9 State Funds 0.0 65 to 74 16.4 Private Insurance 6.0 Administrators 0.0 75 to 84 Req. Nurse Supervisors 21.5 Self Pav 1.6 0.0 85 & over 15.5 9.1 Registered Nurses 3.0 Other TOTAL PATIENTS 383 Licensed Practical Nurses 3.1 Males 30.6% Females 69.4 % Home Health Aides 9.6 Physical Therapists 0.0 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.0 Infectious Disorders 0.3% Digestive Disorders 2.5% Speech Pathologists Billings \$ 1,142,306 0.0 Cancer 6.0 Genitourinary Sys. Disallowances 183,786 Respiratory Therapists 0.0 1.3

0.0

5.0

2.8

0.0

7.9

3.2

6.9

0.0

16.7

Collections

EXPENSES

\$

Other

Total

Total

958,520

959,032

945,859

512

Medical Social Workers

Personal Care Workers

Homemakers

Other Staff

TOTAL FTES

Other Therapeutic Staff

0.0

0.0

0.0

0.0

1.8

17.5

6.6 Preq. & Childbirth

1.9 Arthropathies

1.9 Perinatal Period

7.6 Ill-Defined Cond.

3.5 Compl. of Surgery

5.0 Other Conditions

2.5 Osteopathies

14.2 Wounds, Burns

4.1 Fractures

Diabetes

Stroke

Diseases of Blood

Paralysis/CP

Respiratory

Cardiovascular

Dementia/Alzheimers

Central Nervous Sys.

Psvchoses/Neuroses

2727 South Kemp Street Avalon WI 53505 Dane Rock County Rock

(608) 676-2337

00) 070-2337						
License Number: 1015 Ownership of Agency: Pro	oprietary Corporatio	n		•	TOTAL NUMBER OF ADMISSIONS	15
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	tified? No tified? Yes tal? No	64			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	100.0% 0.0 0.0 0.0
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	17
Skilled Nursing	1 3	3.0			, g	
Home Health Aide	1 88	88.0		:	PERCENT DISCHARGES TO:	
Physical Therapy	0 0	0.0			Private Residences	29.4%
Spch/Occ/Resp Therapy	0 0	0.0			General Hospitals	5.9
Medical Social Service	e 0 0	0.0			Nursing Homes	11.8
Private Duty Nursing	0 0	0.0			Deaths	17.6
Personal Care/PC RN Su		178.0			Other	35.3
Other Home Health Care		0.0				
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 22,871	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBU	DODWENT COLLDO				
Under 4 1.6%	Medicare	0.0%				
4 to 34 57.8	Medicale	92.2				
35 to 54 18.8	Other Federa					
55 to 64 4.7	State Funds	0.0			STAFFING	FTES
65 to 74 1.6	Private Insu			·	Administrators	0.9
75 to 84 14.1	Self Pay	1.6			Reg. Nurse Supervisors	1.0
85 & over 1.6	Other	0.0			Registered Nurses	0.1
	TOTAL PATIEN	TS 64			Licensed Practical Nurses	0.0
Males 54.7% Females	45.3 %				Home Health Aides	1.0
					Physical Therapists	0.0
	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Dis		Billings \$	1,535,303	Speech Pathologists	0.0
Cancer	0.0 Genitourinary		Disallowances	20,000	Respiratory Therapists	0.0
Diabetes	6.3 Preg. & Child		Collections	1,515,303	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies	6.3	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	6.3 Osteopathies	0.0	Total	1,515,303	Personal Care Workers	40.8
Psychoses/Neuroses	0.0 Perinatal Per				Homemakers	0.0
Central Nervous Sys.	3.1 Ill-Defined C		EXPENSES	1 224 665	Other Staff	3.8
Paralysis/CP	42.2 Fractures	0.0	Total \$	1,334,685	TOTAL FTES	47.5
Cardiovascular	0.0 Wounds, Burns					
Stroke	0.0 Compl. of Sur					
Respiratory	4.7 Other Condition	ons 31.3				

COUNTIES SERVED At Home Healthcare 1969 West Hart Road Green

Beloit WI 53511 Rock County Rock Walworth

(608) 363-5885

00/ 303-3003				
License Number: 98 Ownership of Agency: Nor	nprofit Corporation		TOTAL NUMBER OF ADMISSIONS	376
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	tified? Yes tified? Yes l? Yes	404	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	21.0% 71.8 4.8 2.4
	NO. OF NO. OF	VISITS PER	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT	(Including Deaths)	345
Skilled Nursing	391 5,921	15.1		
Home Health Aide	87 1,738	20.0	PERCENT DISCHARGES TO:	
Physical Therapy	145 959	6.6	Private Residences	86.4%
Spch/Occ/Resp Therapy		2.8	General Hospitals	4.3
Medical Social Service		1.0	Nursing Homes	3.2
Private Duty Nursing	0 0	0.0	Deaths	1.7
Personal Care/PC RN St Other Home Health Care		0.0	Other	4.3
Homemkr & Other Non H		0.0		
TOTAL	XXXXXXX 8,800	XXXXX		
IOIAL	XXXXXXX 0,000	222222		
AGE AND SEX OF PATIENTS	PATIENT REIMBU	RSEMENT SOURCE		
Under 4 4.0%	Medicare	64.0%		
4 to 34 4.0	Medicaid	13.0		
35 to 54 14.1	Other Federa	1 0.0		
55 to 64 16.8	State Funds	0.0	STAFFING	FTES
65 to 74 19.1	Private Insu		Administrators	1.0
75 to 84 23.8	Self Pay	1.4	Reg. Nurse Supervisors	1.0
85 & over 18.3	Other	4.4	Registered Nurses	7.3
	TOTAL PATIEN	TS 430	Licensed Practical Nurses	
Males 40.8% Females	59.2 %		Home Health Aides	2.6
ות	RIMARY DIAGNOSIS		Physical Therapists REVENUE Occupational Therapists	0.8 0.1
Infectious Disorders	1.0% Digestive Dis	orders 2.2%	REVENUE Occupational Therapists Billings \$ 1,098,111 Speech Pathologists	0.1
Cancer	6.2 Genitourinary		Disallowances 215,567 Respiratory Therapists	0.0
Diabetes	2.5 Preq. & Child		Collections 882,544 Medical Social Workers	0.0
Diseases of Blood	1.2 Arthropathies		Other 0 Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.7 Osteopathies	1.7	Total 882,544 Personal Care Workers	0.0
Psychoses/Neuroses	0.2 Perinatal Per		Homemakers	0.0
Central Nervous Sys.	1.2 Ill-Defined C	ond. 4.2	EXPENSES Other Staff	2.2
Paralysis/CP	0.2 Fractures	2.5	Total \$ 1,280,586 TOTAL FTES	15.0
Cardiovascular	15.3 Wounds, Burns			
Stroke	2.0 Compl. of Sur			
Respiratory	4.2 Other Conditi	ons 40.3		

Memorial Community Hospital Home Health Agency 1011 North Main Street

Edgerton WI 53534

Rock County

Dane Jefferson Rock

COUNTIES SERVED

(608) 884-4910

08) 884-4910							
License Number: 159 Ownership of Agency: Nor	nprofit Cor	poration			•	TOTAL NUMBER OF ADMISSIONS	206
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	cified? cified? L?	Yes Yes Yes	244		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	4.9% 43.2 10.7 41.3
	NO. OF	NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	208
Skilled Nursing	195	2,997	15.4				
Home Health Aide	60	1,040	17.3		1	PERCENT DISCHARGES TO:	
Physical Therapy	95	1,019	10.7			Private Residences	84.6%
Spch/Occ/Resp Therapy	38	162	4.3			General Hospitals	7.7
Medical Social Service Private Duty Nursing	e 12 0	53 0	4.4			Nursing Homes Deaths	2.9 0.0
Personal Care/PC RN St		839	38.1			Other	4.8
Other Home Health Care		161	10.1			Ocher	1.0
Homemkr & Other Non H		1,120	37.3				
TOTAL	XXXXXXX	7,391	XXXXX				
AGE AND SEX OF PATIENTS	DAMTE	NO DEIMBII	RSEMENT SOURCE				
Under 4 0.0%		ni keimbui icare	SEMENI SOURCE 69.8%				
4 to 34 0.8		icaid	6.5				
35 to 54 4.5		er Federal					
55 to 64 7.8	Sta	te Funds	0.0		:	STAFFING	FTES
65 to 74 13.5	Pri	vate Insui	cance 8.6			Administrators	1.0
75 to 84 41.8	Sel	f Pay	10.2			Reg. Nurse Supervisors	0.6
85 & over 31.6	Oth		4.9			Registered Nurses	3.6
		AL PATIENT	rs 245			Licensed Practical Nurses	0.0
Males 32.8% Females	67.2 %					Home Health Aides	2.2
זם	RIMARY DIAG	NOSTS		REVENUE		Physical Therapists Occupational Therapists	0.4 0.2
Infectious Disorders		stive Disc	orders 0.8%	Billings \$	841,295	Speech Pathologists	0.1
Cancer		tourinary		Disallowances	16,079	Respiratory Therapists	0.0
Diabetes	16.8 Preq		2	Collections	825,216	Medical Social Workers	0.1
Diseases of Blood	0.0 Arth		14.8	Other	4,207	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.8 Oste		1.2	Total	829,423	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri				Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES	E00 E60	Other Staff	1.5
Paralysis/CP Cardiovascular	1.2 Frac 10.7 Woun		4.5 3.7	Total \$	592,762	TOTAL FTES	9.8
Stroke		as, Burns 1. of Suro					
Respiratory		r Condition					
1.05P1140011	3.0 00110		J.1				

Page 101 ercy Assisted Care COUNTIES SERVED

Mercy Assisted Care 901 Mineral Point Avenue Janesville WI 53548

e WI 53548 Rock County

Green Rock Walworth

(608) 7	54-	22	0	1
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License Number: 99 Ownership of Agency: No	nprofit Corpo	ration			5	TOTAL NUMBER OF ADMISSIONS	1,023
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Ye tified? Ye tal? Ye	s s s	,041		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	30.7% 52.9 13.4 3.0
SERVICES PROVIDED Skilled Nursing	PATIENTS		SITS PER ATIENT 11.5		:	TOTAL NUMBER OF DISCHARGES (Including Deaths)	1,006
Home Health Aide Physical Therapy	295 478	9,187	31.1		1	PERCENT DISCHARGES TO: Private Residences	78.9%
			4.2				
Spch/Occ/Resp Therapy Medical Social Servic		1,340				General Hospitals	3.6
		92	1.0			Nursing Homes	5.1
Private Duty Nursing	0	0	0.0			Deaths	4.1 8.3
Personal Care/PC RN S Other Home Health Car		11,465	29.7			Other	8.3
Homemkr & Other Non H	-	0	0.0 125.9				
TOTAL		,	XXXXX				
IOIAL	ΛΛΛΛΛΛ	40,004	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATIENT	REIMBURSEMI	ENT SOURCE				
Under 4 0.8%	Medic	are	57.5%				
4 to 34 1.5	Medic	aid	12.8				
35 to 54 10.6	Other	Federal	0.0				
55 to 64 13.6	State	Funds	0.0		9	STAFFING	FTES
65 to 74 21.3	Priva	te Insurance	e 15.1			Administrators	1.0
75 to 84 30.5	Self	Pay	5.4			Req. Nurse Supervisors	1.0
85 & over 21.7	Other	•	9.2			Registered Nurses	11.7
	TOTAL	PATIENTS	1,176			Licensed Practical Nurses	0.0
Males 32.2% Females	67.8 %		,			Home Health Aides	8.0
						Physical Therapists	0.0
P	RIMARY DIAGNO	SIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	1.0% Digest	ive Disorder	rs 2.3%	Billings \$	2,924,198	Speech Pathologists	0.0
Cancer	4.9 Genito	urinary Sys	. 2.9	Disallowances	90,963	Respiratory Therapists	0.0
Diabetes	6.6 Preg.	& Childbirth	h 0.2	Collections	2,833,235	Medical Social Workers	0.2
Diseases of Blood	3.2 Arthro	pathies	6.3	Other	2,973	Other Therapeutic Staff	0.0
Dementia/Alzheimers	1.0 Osteop	athies	1.2	Total	2,836,208	Personal Care Workers	12.7
Psychoses/Neuroses	0.7 Perina	tal Period	0.2			Homemakers	4.1
Central Nervous Sys.	1.2 Ill-De	fined Cond.	3.5	EXPENSES		Other Staff	12.0
Paralysis/CP	1.0 Fractu		3.1	Total \$	2,896,164	TOTAL FTES	50.8
Cardiovascular	10.9 Wounds	, Burns	2.2	•	•		
Stroke		of Surgery	2.5				
Respiratory	9.1 Other		34.8				

Indianhead Home Health Care 209 East Third Street South Ladysmith WI 54848 (715) 532-5594		COUNTIES SERVED Barron Polk Rusk St. Croix Washburn		
License Number: 295 Ownership of Agency: No Title 18 (Medicare) cer	tified? Yes		TOTAL NUMBER OF ADMISSIONS 45 PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated p	tal? No		Private Residences 46.7% General Hospitals 44.4 Nursing Homes 8.9	
	NO. OF NO. OF VISITS PER		Other 0.0 TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS PATIENT		(Including Deaths) 47	
Skilled Nursing Home Health Aide	46 926 20.1 8 1,098 137.3		PERCENT DISCHARGES TO:	
Physical Therapy Spch/Occ/Resp Therapy Medical Social Service			Private Residences 23.4% General Hospitals 74.5 Nursing Homes 0.0	
Private Duty Nursing Personal Care/PC RN S Other Home Health Care			Deaths 0.0 Other 2.1	
Homemkr & Other Non H				
TOTAL	XXXXXXX 2,690 XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURC	3		
Under 4 0.0%	Medicare 6.3	26		
4 to 34 1.6	Medicaid 69.8			
35 to 54 16.1 55 to 64 8.1	Other Federal 0.0 State Funds 0.0		STAFFING FTES	
65 to 74 25.8	Private Insurance 20.6		Administrators 0.0	
75 to 84 30.6	Self Pay 3.2		Req. Nurse Supervisors 0.1	
85 & over 17.7	Other 0.0		Registered Nurses 0.6	
	TOTAL PATIENTS 63		Licensed Practical Nurses 0.0	
Males 33.9% Females	66.1 %		Home Health Aides 2.2	
			Physical Therapists 0.0	
	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists 0.0	
Infectious Disorders	0.0% Digestive Disorders 4.8%	Billings \$ 213,748		
Cancer Diabetes	3.2 Genitourinary Sys. 3.2 8.1 Preg. & Childbirth 0.0	Disallowances 55,917 Collections 157,831	1 1	
Diseases of Blood	1.6 Arthropathies 11.3	Other (57,831		
Dementia/Alzheimers	8.1 Osteopathies 1.6	Total 157,831	-	
Psychoses/Neuroses	14.5 Perinatal Period 0.0	137,7031	Homemakers 0.0	
Central Nervous Sys.	0.0 Ill-Defined Cond. 4.8	EXPENSES	Other Staff 0.1	
Paralysis/CP	3.2 Fractures 1.6	Total \$ 152,282		
Cardiovascular	16.1 Wounds, Burns 3.2	•		
Stroke	4.8 Compl. of Surgery 0.0			
Respiratory	4.8 Other Conditions 4.8			

COUNTIES SERVED Rusk

Rusk County Department of Health and Human Services
311 Miner Avenue, East Street, Suite C220
Ladysmith WI 54848 Rusk County

(715) 532-2299

License Number: 100 TOTAL NUMBER OF ADMISSIONS 1							
Ownership of Agency: Courtitle 18 (Medicare) certaitle 19 (Medicaid) certaffiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? No	148		;	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	46.2% 47.3 4.1 2.4	
SERVICES PROVIDED	NO. OF NO. OF PATIENTS VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	164	
Skilled Nursing	148 1,968	13.3					
Home Health Aide	68 1,279	18.8			PERCENT DISCHARGES TO:		
Physical Therapy	0 0	0.0			Private Residences	78.0%	
Spch/Occ/Resp Therapy	0 0	0.0			General Hospitals	6.1	
Medical Social Service		0.0			Nursing Homes	5.5	
Private Duty Nursing	0 0	0.0			Deaths	9.1	
Personal Care/PC RN St		0.0			Other	1.2	
Other Home Health Care Homemkr & Other Non H	-	0.0					
TOTAL	XXXXXXX 3,247	XXXXX					
IOIAL	AAAAAA 3,247	ΛΛΛΛΛ					
AGE AND SEX OF PATIENTS	PATIENT REIMBUR	SEMENT SOURCE					
Under 4 0.7%	Medicare	73.6%					
4 to 34 0.7	Medicaid	11.2					
35 to 54 12.2	Other Federal						
55 to 64 12.2	State Funds	0.0			STAFFING	FTES	
65 to 74 16.9	Private Insur	cance 13.5			Administrators	1.0	
75 to 84 32.4	Self Pay	0.0			Req. Nurse Supervisors	1.0	
85 & over 25.0	Other	1.7			Registered Nurses	4.0	
	TOTAL PATIENT	TS 178			Licensed Practical Nurses	0.0	
Males 38.5% Females	61.5 %				Home Health Aides	1.4	
					Physical Therapists	0.0	
——————————————————————————————————————	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0	
Infectious Disorders	1.4% Digestive Disc		Billings \$	410,780	Speech Pathologists	0.0	
Cancer	14.2 Genitourinary		Disallowances	34,810	Respiratory Therapists	0.0	
Diabetes	6.1 Preg. & Childh		Collections	375 , 970	Medical Social Workers	0.0	
Diseases of Blood	0.7 Arthropathies	9.5	Other	119,352	Other Therapeutic Staff	0.0	
Dementia/Alzheimers	6.1 Osteopathies	1.4	Total	495,322	Personal Care Workers	0.0	
Psychoses/Neuroses	0.0 Perinatal Peri				Homemakers	0.0	
Central Nervous Sys.	3.4 Ill-Defined Co		EXPENSES	405 202	Other Staff	3.0	
Paralysis/CP	0.0 Fractures	5.4	Total \$	495,322	TOTAL FTES	10.4	
Cardiovascular	16.2 Wounds, Burns	10.8					
Stroke	1.4 Compl. of Surg						
Respiratory	5.4 Other Condition	ons 3.4					

Page 104 Heartland Home Health COUNTIES SERVED

990 Hillcrest Street, Suite 104
Baldwin WI 54002 St. Croix County

Dunn

Baldwin WI 54002		St. Cr	oix County	Y	Pierce Polk			
(715) 684-5020					St. Croix			
License Number Ownership of A		nrofit Cor	moration				TOTAL NUMBER OF ADMISSIONS	314
Title 18 (Medi Title 19 (Medi Affiliated wit	care) cert caid) cert h a hospit	ified? ified? al?	Yes Yes Yes				PERCENT ADMISSIONS FROM: Private Residences General Hospitals	25.5% 59.6
Number of undu	plicated p	atients in	1 2004 =	338			Nursing Homes Other	8.6 6.4
SERVICES PROVI		NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	322
Skilled Nurs	_	263	2,575	9.8				
Home Health		83	765	9.2			PERCENT DISCHARGES TO:	
Physical The		153	1,067	7.0			Private Residences	84.5%
Spch/Occ/Res		53	173	3.3			General Hospitals	4.3
Medical Soci			1	1.0			Nursing Homes	5.0
Private Duty		0	0	0.0			Deaths	3.4
Personal Car			0	0.0			Other	2.8
Other Home H			0	0.0				
Homemkr & Ot	her Non HH		0	0.0				
TOTAL		XXXXXXX	4,581	XXXXX				
AGE AND SEX OF	PATIENTS	PATIE	NT REIMBU	RSEMENT SOURC	₹			
Under 4	9.2%	Med	licare	61.3	8			
4 to 34	3.6	Med	licaid	4.1				
35 to 54	15.1	Oth	er Federa	0.0				
55 to 64	12.4	Sta	ite Funds	0.0			STAFFING	FTES
65 to 74	18.6	Pri	vate Insu:	rance 31.1			Administrators	1.0
75 to 84	28.4	Sel	f Pay	0.6			Reg. Nurse Supervisors	1.5
85 & over	12.7	Oth	er	2.9			Registered Nurses	3.0
		TOT	AL PATIENT	TS 341			Licensed Practical Nurses	0.0
Males 39.1%	Females	60.9 %					Home Health Aides	0.6
							Physical Therapists	0.4
	PR	IMARY DIAG	NOSIS		REVENUE	!	Occupational Therapists	0.0
Infectious D	isorders	1.2% Dige	stive Disc	orders 6.8%	Billings \$	678,546	Speech Pathologists	0.0
Cancer			tourinary		Disallowances	39,826	Respiratory Therapists	0.0
Diabetes			s. & Child		Collections	638,720	Medical Social Workers	0.0
Diseases of	Blood	0.6 Arth	ropathies	33.1	Other	278,042	Other Therapeutic Staff	0.0
Dementia/Alz	heimers	0.3 Oste		0.9	Total	916,762	Personal Care Workers	0.0
Psychoses/Ne	uroses	0.3 Peri	.natal Per:	iod 8.3		•	Homemakers	0.0
a 1 1 17	~	1 0	D C' 1 G	1 10	=======================================	-	011 01 55	0 0

	PRIMARY	DIAGNOSIS		REVENUE		Occupational Therapists
Infectious Disorders	3 1.2%	Digestive Disorders	6.8%	Billings \$	678,546	Speech Pathologists
Cancer	3.8	Genitourinary Sys.	3.3	Disallowances	39,826	Respiratory Therapists
Diabetes	2.1	Preg. & Childbirth	0.0	Collections	638,720	Medical Social Workers
Diseases of Blood	0.6	Arthropathies	33.1	Other	278,042	Other Therapeutic Staff
Dementia/Alzheimers	0.3	Osteopathies	0.9	Total	916,762	Personal Care Workers
Psychoses/Neuroses	0.3	Perinatal Period	8.3			Homemakers
Central Nervous Sys	. 1.8	Ill-Defined Cond.	1.8	EXPENSES		Other Staff
Paralysis/CP	0.0	Fractures	1.5	Total \$	896,829	TOTAL FTES
Cardiovascular	14.8	Wounds, Burns	0.9			
Stroke	0.9	Compl. of Surgery	9.2			
Respiratory	3.3	Other Conditions	5.3			

2.8 9.3

REM Health of Wisconsin 1007 Washington Avenue Baraboo WI 53913 (608) 356-7570 License Number: 36 Ownership of Agency: Lim Title 18 (Medicare) cert Title 19 (Medicaid) cert	ified? Yes ified? Yes		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	214
Affiliated with a hospit Number of unduplicated p		L	Richland Nursing Homes	79.0 6.1 0.0
SERVICES PROVIDED Skilled Nursing Home Health Aide	PATIENTS VISITS PATI 279 6,878 24 59 8,533 144	1.7 1.6	Vernon TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO:	164
Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH TOTAL	8 61 7 9 0 0 0 19 3,065 161 1pv. 222 20,410 91 9 0 0	L.9).0).0	General Hospitals Nursing Homes Deaths	51.6% 6.1 6.1 3.7 22.6
AGE AND SEX OF PATIENTS Under 4 2.7%	PATIENT REIMBURSEMENT	SOURCE 33.2%		
Under 4 2.7% 4 to 34 15.0 35 to 54 18.3 55 to 64 14.6 65 to 74 19.6 75 to 84 15.6 85 & over 14.3	Medicare Medicaid Other Federal State Funds Private Insurance Self Pay Other TOTAL PATIENTS	33.2% 38.5 0.0 0.0 28.3 0.0 0.0 343	STAFFING F Administrators Reg. Nurse Supervisors Registered Nurses 1	FTES 0.1 3.0 13.2 2.9
Males 50.5% Females	49.5 %		Home Health Aides Physical Therapists	5.8 1.0
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	1.0% Digestive Disorders 1.0% Digestive Disorders 7.6 Genitourinary Sys. 6.0 Preg. & Childbirth 4.0 Arthropathies 6.6 Osteopathies 1.7 Perinatal Period 4.3 Ill-Defined Cond. 2.0 Fractures 8.3 Wounds, Burns 6.3 Compl. of Surgery 5.6 Other Conditions	4.0% 1.3 0.3 1.0 7.0 0.3 3.7 9.0 2.3 8.3 9.3	Billings \$ 3,430,712 Speech Pathologists Disallowances 725,169 Respiratory Therapists Collections 2,705,543 Medical Social Workers Other 0 Other Therapeutic Staff Total 2,705,543 Personal Care Workers 2 Homemakers Other Staff	0.0 0.0 0.0 0.0 0.0 22.1 0.0 6.5 54.5

Page 106 COUNTIES SERVED Sauk

Sauk County Health Department 505 Broadway, Suite 372 Baraboo WI 53913 Sauk County

(608) 355-3290

License Number: 102 Ownership of Agency: Co	untv					TOTAL NUMBER OF ADMISSIONS	131
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? tified? tal?	Yes Yes No 2004 =	163		;	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	19.1% 52.7 15.3 13.0
SERVICES PROVIDED	NO. OF PATIENTS 160	NO. OF VISITS	VISITS PER PATIENT 22.4		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	131
Skilled Nursing Home Health Aide	75	3,586 3,010	22.4 40.1			PERCENT DISCHARGES TO:	
Physical Therapy	75 58	437	7.5		•	Private Residences	58.0%
Spch/Occ/Resp Therapy		38	3.2			General Hospitals	6.1
Medical Social Servic		0	0.0			Nursing Homes	11.5
Private Duty Nursing	0	0	0.0			Deaths	6.9
Personal Care/PC RN S	-	0	0.0			Other	17.6
Other Home Health Car		Ö	0.0			001101	27.0
Homemkr & Other Non H	Н 0	0	0.0				
TOTAL	XXXXXXX	7,071	XXXXX				
AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 1.2% Medicare 68.3%							
4 to 34 1.2		licaid	22.2				
35 to 54 12.3 55 to 64 8.0		er Federal te Funds	0.0			STAFFING	FTES
65 to 74 22.7		.ce Fullas vate Insur			!	Administrators	1.0
75 to 84 28.8		f Pay	1.8			Req. Nurse Supervisors	1.0
85 & over 25.8	Oth	4	1.8			Registered Nurses	3.4
03 & 0VC1 23.0		AL PATIENT				Licensed Practical Nurses	0.0
Males 35.6% Females	64.4 %	111111111	207			Home Health Aides Physical Therapists	2.6
P	RIMARY DIAG	NOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders		stive Disc	orders 3.7%	Billings \$	732,238	Speech Pathologists	0.0
Cancer	4.3 Geni	tourinary	Sys. 3.1	Disallowances	190,806	Respiratory Therapists	0.0
Diabetes	6.7 Preg	. & Childb	oirth 0.0	Collections	541,432	Medical Social Workers	0.0
Diseases of Blood	1.2 Arth	ropathies	4.3	Other	18,111	Other Therapeutic Staff	0.0
Dementia/Alzheimers		opathies	1.8	Total	559,543	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri				Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	2.7
Paralysis/CP	0.6 Frac		6.7	Total \$	636,891	TOTAL FTES	10.8
Cardiovascular	19.6 Wour		1.8				
Stroke		l. of Surg					
Respiratory	11.7 Othe	r Conditio	ons 24.5				

Page 107 COUNTIES SERVED Sawyer

Sawyer County Health and Human Services 105 East 4th Street

Hayward WI 54843

Sawyer County

(715) 634-4806

13, 031 1000						
License Number: 103 Ownership of Agency: Cou	intv			•	TOTAL NUMBER OF ADMISSIONS	111
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	rified? Yes rified? Yes ral? No	125		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	18.0% 64.0 9.0 9.0
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	113
Skilled Nursing	125 749	6.0			(Including Deachb)	113
Home Health Aide	36 638	17.7		,	PERCENT DISCHARGES TO:	
Physical Therapy	97 1,765	18.2		•	Private Residences	72.6%
	3 19	6.3				
Spch/Occ/Resp Therapy Medical Social Service		0.0			General Hospitals	4.4 3.5
	0 0	0.0			Nursing Homes Deaths	6.2
Private Duty Nursing	-	0.0			Other	13.3
Personal Care/PC RN Su Other Home Health Care		0.0			Other	13.3
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 3,171	XXXXX				
IOIAL	AAAAAA 3,1/1	ΛΛΛΛΛ				
AGE AND SEX OF PATIENTS	PATIENT REIMBURS	EMENT SOURCE				
Under 4 0.0%	Medicare	76.0%				
4 to 34 3.2	Medicaid	13.6				
35 to 54 7.2	Other Federal	0.0				
55 to 64 13.6	State Funds	0.0			STAFFING	FTES
65 to 74 22.4	Private Insura				Administrators	1.0
75 to 84 36.8	Self Pay	0.8			Req. Nurse Supervisors	0.0
85 & over 16.8	Other	0.0			Registered Nurses	2.4
03 & 0001 10.0	TOTAL PATIENTS				Licensed Practical Nurses	0.0
Males 32.0% Females		123			Home Health Aides	2.7
March 32.00 Females	00.0 %				Physical Therapists	0.0
PR	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Disor	ders 1.6%	Billings \$	470,428	Speech Pathologists	0.0
Cancer	4.8 Genitourinary S		Disallowances	19,065	Respiratory Therapists	0.0
Diabetes	0.8 Preg. & Childbi	2	Collections	451,363	Medical Social Workers	0.0
Diseases of Blood	1.6 Arthropathies	12.8	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.8 Osteopathies	0.8	Total	451,363	Personal Care Workers	0.0
Psychoses/Neuroses	0.8 Perinatal Perio		- 	,	Homemakers	0.0
Central Nervous Sys.	4.8 Ill-Defined Con		EXPENSES		Other Staff	0.9
Paralysis/CP	2.4 Fractures	4.0	Total \$	448,033	TOTAL FTES	6.9
Cardiovascular	6.4 Wounds, Burns	2.4	т	,		
Stroke	1.6 Compl. of Surge					
Respiratory	0.0 Other Condition					
T						

COUNTIES SERVED St. Nicholas Hospital Home Health and Hospice 3100 Superior Avenue Calumet Sheboygan WI 53081 Sheboygan County Fond du Lac Manitowoc (920) 457-5770 Sheboygan License Number: 124 TOTAL NUMBER OF ADMISSIONS 632 Ownership of Agency: Nonprofit Church/Corporation Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 33.7% Department of a hospital? Yes General Hospitals 63.1 Number of unduplicated patients in 2004 = 603 Nursing Homes 2.1 Other 1.1 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES PATIENTS VISITS PATIENT (Including Deaths) 599 SERVICES PROVIDED Skilled Nursing 536 9,570 17.9 Home Health Aide 168 5,396 32.1 PERCENT DISCHARGES TO: Physical Therapy 132 1,090 8.3 Private Residences 75.6% Spch/Occ/Resp Therapy 53 478 9.0 General Hospitals 9.0 Medical Social Service 43 74 1.7 Nursing Homes 5.5 Private Duty Nursing 0 Ω 0.0 Deaths 3.5 Personal Care/PC RN Supv. Other 7,959 58.1 6.3 137 Other Home Health Care 0 Ω 0.0 Homemkr & Other Non HH 35 1,143 32.7 TOTAL XXXXXXX 25,710 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 1.2% Medicare 68.0% 4 to 34 4.3 Medicaid 12.5 35 to 54 Other Federal 8.0 0.0 55 to 64 State Funds STAFFING FTES 10.9 0.0 65 to 74 17.4 Private Insurance 15.3 Administrators 1.0 Self Pay 75 to 84 35.5 Req. Nurse Supervisors 4.0 0.0 85 & over 22.7 Other 0.3 Registered Nurses 10.3 TOTAL PATIENTS 649 Licensed Practical Nurses 0.3 Home Health Aides Males 39.5% Females 60.5 % 4.1 1.4 PRIMARY DIAGNOSTS 0.5 В 0.1

		DINGNODID	
Infectious Disorders	0.5%	Digestive Disorders	7.1%
Cancer	7.8	Genitourinary Sys.	4.3
Diabetes	3.6	Preg. & Childbirth	0.3
Diseases of Blood	0.7	Arthropathies	11.6
Dementia/Alzheimers	0.8	Osteopathies	1.2
Psychoses/Neuroses	0.8	Perinatal Period	0.8
Central Nervous Sys.	3.5	Ill-Defined Cond.	8.0
Paralysis/CP	0.8	Fractures	5.0
Cardiovascular	15.1	Wounds, Burns	2.5
Stroke	3.8	Compl. of Surgery	1.3
Respiratory	8.1	Other Conditions	12.3

		Physical Therapists	1.4
REVENUE		Occupational Therapists	0.5
Billings \$	1,418,256	Speech Pathologists	0.1
Disallowances	212,614	Respiratory Therapists	0.0
Collections	1,205,642	Medical Social Workers	0.3
Other	102,110	Other Therapeutic Staff	0.0
Total	1,307,752	Personal Care Workers	6.7
		Homemakers	1.5
EXPENSES	3	Other Staff	7.1
Total \$	2,269,881	TOTAL FTES	33.1

Page 109 au County Health Department COUNTIES SERVED

Trempealeau County Health Department Courthouse

Trempealeau Trempealeau

(715) 538-2311

Whitehall WI 54773

13/ 330-2311							
License Number: 107 Ownership of Agency: Co	untv					TOTAL NUMBER OF ADMISSIONS	51
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? tified? tal?	No Yes No 2004 =	87			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	82.4% 9.8 2.0 5.9
	NO. OF	NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	40
Skilled Nursing	18	347	19.3			_	
Home Health Aide	4	57	14.3			PERCENT DISCHARGES TO:	
Physical Therapy	0	0	0.0			Private Residences	32.5%
Spch/Occ/Resp Therapy		0	0.0			General Hospitals	20.0
Medical Social Servic		0	0.0			Nursing Homes	35.0
Private Duty Nursing	0	0	0.0			Deaths	7.5
Personal Care/PC RN S		8,561	59.5			Other	5.0
Other Home Health Car		0	0.0				
Homemkr & Other Non H	H 0 XXXXXXX	0	0.0 XXXXX				
TOTAL	XXXXXXX	8,965	XXXXX				
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	RSEMENT SOURCE				
Under 4 0.0%		icare	0.0%				
4 to 34 2.3	Med	icaid	77.4				
35 to 54 13.8	Oth	er Federal	0.0				
55 to 64 8.0	Sta	te Funds	0.0			STAFFING	FTES
65 to 74 13.8	Pri	vate Insur	rance 1.1			Administrators	0.0
75 to 84 36.8	Sel	f Pay	4.3			Reg. Nurse Supervisors	0.3
85 & over 25.3	Oth		17.2			Registered Nurses	0.6
		AL PATIENT	TS 93			Licensed Practical Nurses	0.0
Males 19.5% Females	80.5 %					Home Health Aides	0.1
D	DIMADY DIAG	MOGTG		DEVENUE		Physical Therapists	0.0
Infectious Disorders	RIMARY DIAG	NOSIS stive Disc	orders 0.0%	REVENUE Billings \$	304,712	Occupational Therapists Speech Pathologists	0.0
Cancer		tourinary		Disallowances	7,700	Respiratory Therapists	0.0
Diabetes		. & Childb	2	Collections	297,012	Medical Social Workers	0.0
Diseases of Blood	1.1 Arth		58.6	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Oste		1.1	Total	297,012	Personal Care Workers	0.7
Psychoses/Neuroses		natal Peri			,	Homemakers	0.0
Central Nervous Sys.	0.0 Ill-	Defined Co	ond. 0.0	EXPENSES		Other Staff	0.4
Paralysis/CP	2.3 Frac	tures	1.1	Total \$	386,683	TOTAL FTES	2.0
Cardiovascular	9.2 Woun		0.0				
Stroke	14.9 Comp						
Respiratory	1.1 Othe	r Conditic	ons 8.0				

Vernon Memorial Hospital Home Health Care Agency COUNTIES SERVED 507 South Main Street Crawford Viroqua WI 54665 Vernon County Monroe Richland (608) 637-4362 Vernon License Number: 271 TOTAL NUMBER OF ADMISSIONS 149 Ownership of Agency: Nonprofit Corporation Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 21.5% Department of a hospital? Yes General Hospitals 69.1 Number of unduplicated patients in 2004 = 146 Nursing Homes 9.4 Other 0.0 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES PATIENT SERVICES PROVIDED PATIENTS VISITS (Including Deaths) 151 Skilled Nursing 145 1.307 9.0 Home Health Aide 45 531 11.8 PERCENT DISCHARGES TO: Physical Therapy 99 553 5.6 Private Residences 86.8% Spch/Occ/Resp Therapy 303 4.9 General Hospitals 62 0.7 Medical Social Service 2.0 2.7 1.4 Nursing Homes 7.9 Private Duty Nursing 0 Ω 0.0 Deaths 1.3 Personal Care/PC RN Supv. 0 0.0 Other 3.3 0 Other Home Health Care 4 8 2.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 2,729 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 0.7% Medicare 75.5% 4 to 34 2.7 Medicaid 5.4 35 to 54 Other Federal 15.1 0.0 55 to 64 State Funds STAFFING FTES 13.0 0.0 65 to 74 21.9 Private Insurance 16.3 Administrators 1.0 75 to 84 26.0 Req. Nurse Supervisors Self Pav 0.7 0.5 85 & over 20.5 Other 2.0 Registered Nurses 2.0 TOTAL PATIENTS 147 Licensed Practical Nurses 0.0 Males 42.5% Females 57.5 % Home Health Aides 0.5 Physical Therapists 0.4 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.2 Infectious Disorders 2.7% Digestive Disorders 0.7% 285,992 Speech Pathologists Billings 0.1 Cancer 5.5 Genitourinary Sys. Disallowances 9,355 Respiratory Therapists 0.0 1.4 Diabetes 3.4 Preq. & Childbirth 0.0 Collections 276,637 Medical Social Workers 0.0 0.0 Arthropathies Diseases of Blood 2.1 Other Other Therapeutic Staff 0.0 Dementia/Alzheimers 0.0 Osteopathies 1.4 Total 276,637 Personal Care Workers 0.0 1.4 Perinatal Period Homemakers Psvchoses/Neuroses 0.0 0.0 Central Nervous Sys. 1.4 Ill-Defined Cond. EXPENSES Other Staff 6.2 0.8 Paralysis/CP 0.0 Fractures 2.1 Total 346,471 TOTAL FTES 5.4 Cardiovascular 8.9 Wounds, Burns 2.1

1.4

49.3

4.1 Compl. of Surgery

6.2 Other Conditions

Stroke

Respiratory

Page 111 Home Care Network COUNTIES SERVED

N3252 County Road H Lake Geneva WI 53147

Walworth County

Kenosha Racine Walworth

(262) 248-0457

License Number: 125	priotory Corporation			TOTAL NUMBER OF ADMISSIONS	187
Ownership of Agency: Pro Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Yes ified? Yes al? No	210		PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	33.7% 44.4 4.8 17.1
SERVICES PROVIDED Skilled Nursing		VISITS PER PATIENT 13.1		TOTAL NUMBER OF DISCHARGES (Including Deaths)	17.1
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	28 173 120 1,116 55 408 22 111 0 0 apv. 0 0	6.2 9.3 7.4 5.0 0.0 0.0 0.0 0.0 XXXXX		PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	69.8% 7.6 4.7 3.5 14.5
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 1.4 35 to 54 4.8 55 to 64 11.0 65 to 74 19.5 75 to 84 34.3 85 & over 29.0 Males 37.1% Females	PATIENT REIMBURSE Medicare Medicaid Other Federal State Funds Private Insuran Self Pay Other TOTAL PATIENTS	84.5% 0.9 0.0 0.0		STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides	FTES 1.0 2.0 1.8 0.0 0.1
Infectious Disorders Cancer	1.4% Digestive Disord 3.8 Genitourinary Sy 11.9 Preg. & Childbir 1.0 Arthropathies 2.9 Osteopathies 1.9 Perinatal Period 6.2 Ill-Defined Cond 0.5 Fractures 3.8 Wounds, Burns 3.8 Compl. of Surger 5.7 Other Conditions	rs. 2.4 oth 0.0 2.4 2.9 d 0.0 d. 3.8 9.5 34.8 ry 0.0	REVENUE Billings \$ 829, Disallowances 6, Collections 823, Other Total 823, EXPENSES Total \$ 606,	D59 Respiratory Therapists B22 Medical Social Workers O Other Therapeutic Staff B22 Personal Care Workers Homemakers Other Staff	0.9 0.2 0.1 0.0 0.1 0.0 0.0 0.0 0.9 7.0

Hearts of Gold				COUNTIES SERVED		
38 West 5th Avenue, PO Box 2				Barron		
Shell Lake WI 54871	Washbur	n County		Burnett		
()				Polk		
(715) 468-2931				Sawyer		
T '				Washburn		
License Number: 304					TOTAL NUMBER OF ADMISSIONS	145
Ownership of Agency: Pro		_	<u>l</u>		DEDGENE ADVIGATIONS EDON.	
Title 18 (Medicare) cert Title 19 (Medicaid) cert		les les			PERCENT ADMISSIONS FROM: Private Residences	14.5%
· · · · · · · · · · · · · · · · · · ·						
Affiliated with a hospit		10	1.67		General Hospitals	53.1 6.9
Number of unduplicated p	patients in	2004 =	167		Nursing Homes Other	25.5
					Other	25.5
	NO. OF	NO. OF	VISITS PER		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT		(Including Deaths)	142
Skilled Nursing	167	2,674	16.0		, , , , , , , , , , , , , , , , , , , ,	
Home Health Aide	74	1,980	26.8		PERCENT DISCHARGES TO:	
Physical Therapy	26	167	6.4		Private Residences	71.1%
Spch/Occ/Resp Therapy	1	8	8.0		General Hospitals	14.8
Medical Social Service	9 0	0	0.0		Nursing Homes	2.8
Private Duty Nursing	0	0	0.0		Deaths	6.3
Personal Care/PC RN St	ıpv. 23	803	34.9		Other	4.9
Other Home Health Care	-	0	0.0			
Homemkr & Other Non H	-	0	0.0			
TOTAL	XXXXXXX	5,632	XXXXX			
AGE AND SEX OF PATIENTS			SEMENT SOURCE			
Under 4 0.6%		care	57.8%			
4 to 34 1.8		caid	19.6			
35 to 54 8.4		er Federal			CENERAL	
55 to 64 19.2 65 to 74 13.2		e Funds	0.0		STAFFING	FTES
		ate Insur			Administrators	0.8
75 to 84 29.9		Pay	2.5		Reg. Nurse Supervisors	0.5
85 & over 26.9	Othe	er AL PATIENT	7.8 'S 204		Registered Nurses Licensed Practical Nurses	1.6 1.0
Males 44.3% Females		AL PATTENT	5 204		Home Health Aides	2.6
riales 44.3% relliales	JJ.1 70				Physical Therapists	0.0

1.10	AICD TT.JO ICHIAICD	, ,,,,	0					nome nearth Aracs	2.0
								Physical Therapists	0.0
	P	RIMARY	DIAGNOSIS		REVENU	JΕ		Occupational Therapists	0.0
	Infectious Disorders	4.2%	Digestive Disorders	4.8%	Billings	\$	479,602	Speech Pathologists	0.0
	Cancer	4.8	Genitourinary Sys.	2.4	Disallowances	3	126,156	Respiratory Therapists	0.0
	Diabetes	4.2	Preg. & Childbirth	0.0	Collections		353,446	Medical Social Workers	0.0
	Diseases of Blood	0.6	Arthropathies	4.2	Other		750	Other Therapeutic Staff	0.0
	Dementia/Alzheimers	1.2	Osteopathies	0.6	Total		354,196	Personal Care Workers	0.6
	Psychoses/Neuroses	1.2	Perinatal Period	0.6				Homemakers	0.0
	Central Nervous Sys.	4.2	Ill-Defined Cond.	2.4	EXPENS	SES		Other Staff	2.3
	Paralysis/CP	0.6	Fractures	1.8	Total	\$	441,014	TOTAL FTES	9.3
	Cardiovascular	15.6	Wounds, Burns	4.8					
	Stroke	3.0	Compl. of Surgery	3.6					
	Respiratory	6.0	Other Conditions	29.3					

Indianhead Medical Center Ho 113 4th Avenue Shell Lake WI 54871		Agency rn County		COUNTIES SERVED Barron Burnett Polk			
(715) 468-7833				Sawyer Washburn			
License Number: 324 Ownership of Agency: Pro	oprietary C	orporation	1	wasnburn		TOTAL NUMBER OF ADMISSIONS	84
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	tified? tified? l?	Yes Yes Yes	87			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	29.8% 60.7 4.8 4.8
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	85
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Social Care/PC RN So	e 0 0 upv. 0 e 0	1,098 290 295 0 0 0 0 0	13.1 9.7 7.8 0.0 0.0 0.0 0.0 0.0 0.0			PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	76.5% 11.8 3.5 4.7 3.5
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	SEMENT SOURCE				
Under 4 0.0%	Med	licare	79.5%				
4 to 34 5.7	Med	licaid	12.5				
35 to 54 10.3	Oth	er Federal	0.0				
55 to 64 5.7	Sta	te Funds	0.0			STAFFING	FTES
65 to 74 20.7	Pri	vate Insur	rance 5.7			Administrators	0.1
75 to 84 24.1	Sel	f Pay	1.1			Reg. Nurse Supervisors	1.0
85 & over 33.3	Oth	er	1.1			Registered Nurses	2.0
		'AL PATIENT	S 88			Licensed Practical Nurses	0.0
Males 43.7% Females	56.3 %					Home Health Aides	0.3
						Physical Therapists	0.5
	RIMARY DIAG			REVENUE		Occupational Therapists	0.0
Infectious Disorders		stive Disc		Billings \$	182,920	Speech Pathologists	0.0
Cancer		tourinary		Disallowances	-9,130	Respiratory Therapists	0.0
Diabetes		. & Childh		Collections Other	192,050 0	Medical Social Workers	0.0
Diseases of Blood		ropathies	5.7		0	Other Therapeutic Staff	0.0
Dementia/Alzheimers Psychoses/Neuroses	0.0 Oste	opathies natal Peri	3.4 .od 0.0	Total	192,050	Personal Care Workers Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES	,	Other Staff	0.0
Paralysis/CP	0.0 Frac		13.8	Total \$	291,739	TOTAL FTES	4.7
Cardiovascular	16.1 Woun		2.3	10τα1 ρ	۵٫۱,۱۵۶	TOTAL PIED	4. /
Stroke		ol. of Surc					
Respiratory	<u>P</u>	r Condition					
1.005110.0011	5 OCIIC		-1.7				

Other Therapeutic Staff

Personal Care Workers

Homemakers

TOTAL FTES

Other Staff

403,106

409,484

0.0

0.4

0.0

1.4

7.6

Spooner Health Services Home Care COUNTIES SERVED 819 Ash Street Burnett Spooner WI 54801 Washburn County Douglas Sawyer (715) 635-2111 Washburn License Number: 208 TOTAL NUMBER OF ADMISSIONS 163 Ownership of Agency: Nonprofit Corporation Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 22.7% Department of a hospital? Yes General Hospitals 64.4 Number of unduplicated patients in 2004 = 175 Nursing Homes 12.3 Other 0.6 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES PATIENT SERVICES PROVIDED PATIENTS VISITS (Including Deaths) 167 Skilled Nursing 175 1,665 9.5 Home Health Aide 64 771 12.0 PERCENT DISCHARGES TO: Physical Therapy 111 682 6.1 Private Residences 76.6% Spch/Occ/Resp Therapy 64 205 3.2 General Hospitals 15.0 Medical Social Service 0 0.0 Nursing Homes Ω 2.4 Private Duty Nursing 0 0 0.0 Deaths 0.6 Personal Care/PC RN Supv. 1,091 181.8 Other 5.4 6 Other Home Health Care Ω Ω 0.0 Homemkr & Other Non HH 7 46.3 324 TOTAL XXXXXXX 4,738 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 0.6% Medicare 73.1% 4 to 34 2.3 Medicaid 11.7 35 to 54 Other Federal 9.7 0.0 55 to 64 STAFFING FTES 9.1 State Funds 0.0 65 to 74 21.1 Private Insurance 8.5 Administrators 1.0 75 to 84 Req. Nurse Supervisors 33.7 Self Pav 6.7 1.0 85 & over 23.4 Other Registered Nurses 2.0 0.0 TOTAL PATIENTS 223 Licensed Practical Nurses 0.0 Males 38.3% Females 61.7 % Home Health Aides 1.0 Physical Therapists 0.5 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.3 Infectious Disorders 1.7% Digestive Disorders 1.7% Speech Pathologists Billings 475,063 0.0 Cancer 1.1 Genitourinary Sys. 2.3 Disallowances 71,957 Respiratory Therapists 0.0 Diabetes 3.4 Preq. & Childbirth 0.0 Collections 403,106 Medical Social Workers 0.0

14.9

0.0

0.0

6.3

1.7

1.1

9.7

24.6

Other

Total

Total

EXPENSES

\$

1.1 Arthropathies

1.7 Perinatal Period

1.1 Ill-Defined Cond.

2.9 Compl. of Surgery

9.7 Other Conditions

0.0 Osteopathies

13.7 Wounds, Burns

1.1 Fractures

Diseases of Blood

Paralysis/CP

Respiratory

Stroke

Cardiovascular

Dementia/Alzheimers

Central Nervous Sys.

Psvchoses/Neuroses

Heartland Home Health Care at 1072 Gateway Court West Bend WI 53095 (262) 334-1988 License Number: 1024 Ownership of Agency: Protitle 18 (Medicare) cert Title 19 (Medicare) cert Affiliated with a hospit Number of unduplicated p	Washir prietary (ified? ified? al? atients ir	Corporation Yes Yes No 1 2004 =	508	COUNTIES S Dodge Fond du Milwauk Ozaukee Sheboyg Washing	ı Lac kee e gan		TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	485 42.1% 48.9 2.7 6.4
CERVICEC PROVIDER	NO. OF	NO. OF	VISITS PER				TOTAL NUMBER OF DISCHARGES	E 0.7
SERVICES PROVIDED Skilled Nursing	PATIENTS 502	VISITS 3,954	PATIENT 7.9				(Including Deaths)	507
Home Health Aide	144	6,034	41.9				PERCENT DISCHARGES TO:	
Physical Therapy	412	1,772	4.3				Private Residences	60.9%
Spch/Occ/Resp Therapy	298	1,252	4.2				General Hospitals	15.6
Medical Social Service		116	1.2				Nursing Homes	6.5
Private Duty Nursing	2	825	412.5				Deaths	0.0
Personal Care/PC RN Su		0	0.0				Other	17.0
Other Home Health Care		1	1.0					
Homemkr & Other Non HH	10	266	26.6					
TOTAL	XXXXXXX	14,220	XXXXX					
AGE AND SEX OF PATIENTS	раття	ENT RETMBIIR	RSEMENT SOURCE	2				
Under 4 0.2%		dicare	63.29					
4 to 34 3.3		dicaid	13.4	,				
35 to 54 8.1		ner Federal						
55 to 64 7.9		ate Funds	0.0				STAFFING	FTES
65 to 74 20.5	Pri	ivate Insur					Administrators	1.0
75 to 84 35.2	Sel	lf Pay	2.6				Req. Nurse Supervisors	1.0
85 & over 24.8	Oth		5.3				Registered Nurses	2.6
	TOT	TAL PATIENT	TS 508				Licensed Practical Nurses	2.9
Males 38.6% Females	61.4 %						Home Health Aides	3.0
							Physical Therapists	0.8
PR	IMARY DIAG	NOSIS		F	REVENUE		Occupational Therapists	0.7
Infectious Disorders	0.6% Dige	estive Disc	orders 1.2%	Billings	\$	1,900,360	Speech Pathologists	0.0
Cancer		itourinary		Disallow		403,991	Respiratory Therapists	0.0
Diabetes		g. & Childb		Collecti	ions	1,496,369	Medical Social Workers	0.1
Diseases of Blood		nropathies	5.3	Other		0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.2 Oste		0.8	Total		1,496,369	Personal Care Workers	0.0
Psychoses/Neuroses		inatal Peri					Homemakers	0.0
Central Nervous Sys.		-Defined Co			EXPENSES		Other Staff	2.0
Paralysis/CP	0.2 Frac		1.8	Total	\$	1,464,841	TOTAL FTES	14.2
Cardiovascular		nds, Burns	1.2					
Stroke		ol. of Surg						
Respiratory	2.8 Othe	er Conditio	ons 66.7					

Heartland Home Health Care and Hospice 13255 West Bluemound Road, Suite 100 Brookfield WI 53005 Waukesh Waukesha County

Brown Milwaukee Waukesha

COUNTIES SERVED

(262) 641-6620

62) 641-6620							
License Number: 280 Ownership of Agency: Pro						TOTAL NUMBER OF ADMISSIONS	599
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? al?	Yes Yes No 2004 =	694		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	22.0% 27.0 46.1 4.8
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	608
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH TOTAL	pv. 0 0 0 0 XXXXXXX	8,498 12,055 2,461 5,672 188 4,380 0 0 33,254	17.6 65.5 7.7 26.9 1.8 4380 0.0 0.0 0.0 XXXXX		j	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	59.9% 10.2 5.1 0.5 24.3
AGE AND SEX OF PATIENTS Under 4 0.0%		nt keimbuk icare	SEMENT SOURCE 76.2%				
4 to 34 0.6		icaid	20.2				
35 to 54 4.8		er Federal					
55 to 64 7.6	Sta	te Funds	0.0		:	STAFFING	FTES
65 to 74 20.7	Pri	vate Insur	ance 2.9			Administrators	1.0
75 to 84 29.5	Sel	f Pay	0.7			Reg. Nurse Supervisors	3.0
85 & over 36.7	Oth		0.0			Registered Nurses	6.3
Males 57.3% Females		AL PATIENT	S 694			Licensed Practical Nurses Home Health Aides	10.7 8.3
77	TWARY DIAG	NOGTG		DEVENUE		Physical Therapists	3.1
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP	5.2 Geni 6.5 Preg 1.3 Arth 1.6 Oste 1.2 Peri 3.5 Ill- 0.7 Frac 15.0 Woun 9.7 Comp	stive Diso tourinary . & Childb ropathies opathies natal Peri Defined Co tures	Sys. 2.7 irth 0.0 8.4 2.7 od 0.0 nd. 0.6 10.4 6.2 ery 1.7	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	2,928,328 582,097 2,346,231 60 2,346,291 2,297,400	Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	1.6 0.1 0.0 0.0 0.0 0.0 5.0 39.1

LS Prof Comfort Homes

14665 West Lisbon Road, Suite 1B

Brookfield WI 53005 Waukesha County COUNTIES SERVED Kenosha Milwaukee Waukesha

(262

62) 781-0448				waukesna			
License Number: 1022 Ownership of Agency: Pro	prietary Co	rporation			•	TOTAL NUMBER OF ADMISSIONS	116
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Y ified? Y al? N	es es o	131			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	19.0% 28.4 36.2 16.4
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	105
Skilled Nursing	125	6,472	51.8				
Home Health Aide	54	4,092	75.8		;	PERCENT DISCHARGES TO:	
Physical Therapy	22	211	9.6			Private Residences	61.9%
Spch/Occ/Resp Therapy	4	523	130.8			General Hospitals	26.7
Medical Social Service		0	0.0			Nursing Homes	9.5
Private Duty Nursing	0	0	0.0			Deaths	1.0
Personal Care/PC RN Su		16,285	206.1			Other	1.0
Other Home Health Care		0	0.0				
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXXX	27,583	XXXXX				
AGE AND SEX OF PATIENTS	PATIEN	T REIMBUR	SEMENT SOURCE				
Under 4 6.9%	Medi	care	38.2%				
4 to 34 7.6	Medi	caid	35.9				
35 to 54 26.0	Othe	r Federal	0.0				
55 to 64 21.4	Stat	e Funds	12.2			STAFFING	FTES
65 to 74 13.7	Priv	ate Insur	ance 8.4			Administrators	1.0
75 to 84 18.3	Self	Pay	1.5			Reg. Nurse Supervisors	0.0
85 & over 6.1	Othe	r	3.8			Registered Nurses	3.0
	TOTA	L PATIENT	'S 131			Licensed Practical Nurses	1.5
Males 45.8% Females	54.2 %					Home Health Aides	11.5
						Physical Therapists	0.2
PR	IMARY DIAGN	OSIS		REVENUE		Occupational Therapists	0.1
Infectious Disorders Cancer Diabetes Diseases of Blood	6.1 Preg.	ourinary	Sys. 3.8	Billings \$ Disallowances Collections Other	2,038,444 337,312 1,701,132	Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff	0.0 0.0 0.0
Dementia/Alzheimers	0.8 Osteo		2.3	Total	1,701,132	Personal Care Workers	18.5
Psychoses/Neuroses	3.1 Perin	-		IUCAI	1,/01,134	Homemakers	0.0
Central Nervous Sys.	1.5 Ill-D			EXPENSES		Other Staff	6.8
Paralysis/CP	6.1 Fract		3.8	Total \$	1,682,367	TOTAL FTES	42.5
Cardiovascular		ls, Burns	16.8	ıocaı Ş	1,004,30/	TOTAL FIED	44.0
Stroke		. of Suro					
Respiratory		Condition					
respiracory	2.5 Other	COMMICTO	110 13.0				

Universal Pediatric Services

17100 West Bluemound Road, Suite 101 Brookfield WI 53005 Wauke Waukesha County COUNTIES SERVED Milwaukee Ozaukee Waukesha

(262) 782-8292

102, 702 0232						
License Number: 1009 Ownership of Agency: Pro	oprietary Corporation				TOTAL NUMBER OF ADMISSIONS	4
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	rtified? Yes rtified? Yes rtal? No	34			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 100.0 0.0 0.0
	NO. OF NO. OF	VISITS PER		1	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	14
Skilled Nursing	17 160	9.4			, , , , , , , , , , , , , , , , , , , ,	
Home Health Aide	3 1,447	482.3			PERCENT DISCHARGES TO:	
Physical Therapy	0 0	0.0			Private Residences	78.6%
Spch/Occ/Resp Therapy	3 426	142.0			General Hospitals	0.0
Medical Social Service		0.0			Nursing Homes	0.0
Private Duty Nursing	11 1,605	145.9			Deaths	21.4
Personal Care/PC RN S	Supv. 0 0	0.0			Other	0.0
Other Home Health Car	re 0 0	0.0				
Homemkr & Other Non H	IH 0 0	0.0				
TOTAL	XXXXXXX 3,638	XXXXX				
AGE AND SEX OF PATIENTS						
Under 4 44.1%	Medicare	0.0%				
4 to 34 55.9	Medicaid	97.1				
35 to 54 0.0	Other Federal				STAFFING	FTES
55 to 64 0.0 65 to 74 0.0	State Funds	0.0 ance 0.0				1.0
65 to 74 0.0 75 to 84 0.0	Private Insur Self Pay	2.9			Administrators	0.4
85 & over 0.0	Other	0.0			Reg. Nurse Supervisors Registered Nurses	7.3
os & over 0.0	TOTAL PATIENT				Licensed Practical Nurses	0.3
Males 55.9% Females	101AL PAITENT 44.1 %	5 34			Home Health Aides	2.4
Maics 55.50 Females	, 11.1 0				Physical Therapists	0.0
P	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestive Diso	rders 2.9%	Billings \$	606,095	Speech Pathologists	0.0
Cancer	0.0 Genitourinary		Disallowances	52,425	Respiratory Therapists	0.0
Diabetes	0.0 Preg. & Childb		Collections	553,670	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies	0.0	Other	. 0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies	0.0	Total	553,670	Personal Care Workers	0.0
Psychoses/Neuroses	0.0 Perinatal Peri	od 0.0			Homemakers	0.0
Central Nervous Sys.	2.9 Ill-Defined Co	nd. 0.0	EXPENSES		Other Staff	1.0
Paralysis/CP	11.8 Fractures	0.0	Total \$	658,374	TOTAL FTES	12.4
Cardiovascular	2.9 Wounds, Burns	0.0				
Stroke	0.0 Compl. of Surg					
Respiratory	58.8 Other Condition	ns 20.6				

Prohealth Home Care 1020 James Drive, Suite E Hartland WI 53029 (262) 928-1444 License Number: 170 Ownership of Agency: Nor Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified? Yes cified? Yes cal? Yes	2,327	Waukesha	OTAL NUMBER OF ADMISSIONS ERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	2,201 13.8% 74.0 8.5 3.6
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non He TOTAL AGE AND SEX OF PATIENTS	PATIENTS VISITS 2,327 14,756 320 3,819 1,071 5,712 556 2,252 228 246 0 0 0 apv. 297 5,418 e 0 0	VISITS PER PATIENT 6.3 11.9 5.3 4.1 1.1 0.0 18.2 0.0 33.6 XXXXX		OTAL NUMBER OF DISCHARGES (Including Deaths) ERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	2,368 84.1% 6.3 3.5 1.2 4.9
Under 4 5.1% 4 to 34 10.0 35 to 54 11.7 55 to 64 10.1 65 to 74 15.0 75 to 84 29.1 85 & over 19.0 Males 35.7% Females	Medicare Medicaid Other Federal State Funds Private Insura Self Pay Other TOTAL PATIENTS 64.3 % RIMARY DIAGNOSIS 0.4% Digestive Disor 5.5 Genitourinary S 3.2 Preg. & Childbi 0.5 Arthropathies 0.0 Osteopathies 0.0 Osteopathies 0.2 Perinatal Perio 0.6 Ill-Defined Con 0.0 Fractures 6.6 Wounds, Burns 1.3 Compl. of Surge 4.0 Other Condition	64.8% 2.5 0.0 0.0 32.2 0.4 0.2 2,457 delers 1.0% Sys. 1.4th 0.0 1.1 0.4 4.2 d. 2.7 0.3 2.1 ery 0.7	REVENUE Billings \$ 4,772,396 Disallowances 851,809 Collections 3,920,587 Other 27,177 Total 3,947,764 EXPENSES Total \$ 4,255,140	TAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 1.0 1.0 30.3 1.8 9.2 5.8 2.4 0.5 0.0 0.8 1.0 0.0 2.9 12.9 69.6

94

Hannah Home Health Care 318 North Rochester Street Mukwonago WI 53149 (262) 363-2500 License Number: 240

COUNTIES SERVED

170

Jackson Milwaukee Racine Walworth Waukesha

Waukesha County

License Number: 240	
Ownership of Agency: Proprietary Corporation	
Title 18 (Medicare) certified? Yes	
Title 19 (Medicaid) certified? Yes	
Affiliated with a hospital? No	
Number of unduplicated patients in 2004 =	

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	169	5,024	29.7
Home Health Aide	92	14,793	160.8
Physical Therapy	48	359	7.5
Spch/Occ/Resp Therapy	19	93	4.9
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Sup	v. 58	4,079	70.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	24.348	XXXXX

AGE AND SEX	OF PATIENTS	PATIENT REIMBURSEMENT	SOURCE
Under 4	0.6%	Medicare	42.6%
4 to 34	11.8	Medicaid	41.1
35 to 54	19.4	Other Federal	0.0
55 to 64	10.6	State Funds	1.0
65 to 74	18.2	Private Insurance	10.9
75 to 84	24.1	Self Pay	2.5
85 & over	15.3	Other	2.0
		TOTAL PATIENTS	202

Males	44 1%	Females	55 9 %

	PRIMARY	DIAGNOSIS	
Infectious Disorders	0.6%	Digestive Disorders	0.6%
Cancer	2.4	Genitourinary Sys.	5.3
Diabetes	4.1	Preg. & Childbirth	0.0
Diseases of Blood	1.2	Arthropathies	8.2
Dementia/Alzheimers	5.3	Osteopathies	0.0
Psychoses/Neuroses	3.5	Perinatal Period	0.0
Central Nervous Sys.	9.4	Ill-Defined Cond.	12.4
Paralysis/CP	9.4	Fractures	2.9
Cardiovascular	8.8	Wounds, Burns	1.8
Stroke	2.9	Compl. of Surgery	0.6
Respiratory	2.4	Other Conditions	18.2

TOTAL NUMBER OF ADMISSIONS	103
PERCENT ADMISSIONS FROM:	

DICCUIT IN	DMIDDIOND INOM.	
Private	Residences	35.0%
General	Hospitals	33.0
Nursing	Homes	14.6
Other		17.5

TOTAL NUMBER OF DISCHARGES (Including Deaths)

PERCENT DISCHARGES TO:	
Private Residences	48.9%
General Hospitals	14.9
Nursing Homes	6.4
Deaths	4.3
Other	25.5

STAFFING	FTES
Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.4
Licensed Practical Nurses	0.8
Home Health Aides	8.5
Physical Therapists	0.0
Occupational Therapists	0.0
	0 0

		Physical Therapists	0.0
REVENUE		Occupational Therapists	0.0
Billings \$	1,507,998	Speech Pathologists	0.0
Disallowances	353,740	Respiratory Therapists	0.0
Collections	1,154,258	Medical Social Workers	0.0
Other	12,567	Other Therapeutic Staff	0.0
Total	1,166,825	Personal Care Workers	2.3
		Homemakers	0.0
EXPENSES		Other Staff	3.6
Total \$	1,042,500	TOTAL FTES	18.6

Coram Alternate Site Service 17012 West Victor Road	s Inc.			COUNTIES SERVED			
New Berlin WI 53151	Waukech	na County		Brown Calumet			
New Bellin Wi 33131	waunesi	ia Country		Dane			
(262) 785-9318				Dodge			
(202) 703 3310				Fond du Lac			
License Number: 247				Jefferson		TOTAL NUMBER OF ADMISSIONS	136
Ownership of Agency: Pro	nrietary Co	rporation		Kenosha		TOTAL NORDER OF ADMIDDIOND	130
Title 18 (Medicare) cert		Jo		Manitowoc		PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert		10 10		Marinette		Private Residences	79.4%
Affiliated with a hospit		10		Milwaukee		General Hospitals	17.6
Number of unduplicated p			156	Oconto		Nursing Homes	0.0
				Ozaukee		Other	2.9
				Portage			
	NO. OF	NO. OF	VISITS PER	Racine		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT	Rock		(Including Deaths)	140
Skilled Nursing	156	1,343	8.6	Sauk		, , , , , ,	
Home Health Aide	0	0	0.0	Sheboygan		PERCENT DISCHARGES TO:	
Physical Therapy	0	0	0.0	Walworth		Private Residences	85.0%
Spch/Occ/Resp Therapy	0	0	0.0	Washington		General Hospitals	7.1
Medical Social Service	. 0	0	0.0	Waukesha		Nursing Homes	0.0
Private Duty Nursing	0	0	0.0	Winnebago		Deaths	5.7
Personal Care/PC RN Su	.pv. 0	0	0.0	3		Other	2.1
Other Home Health Care	. 0	0	0.0				
Homemkr & Other Non HH	0	0	0.0				
TOTAL	XXXXXXX	1,343	XXXXX				
AGE AND GEV OF DAMEENING	D						
AGE AND SEX OF PATIENTS			SEMENT SOURCE				
Under 4 0.6% 4 to 34 20.5		care caid	0.0%				
35 to 54 35.3		er Federal	0.0				
55 to 64 26.9		e Funds	0.0			STAFFING	FTES
65 to 74 9.0		ate Insura				Administrators	1.0
75 to 84 5.8		Pay	1.9			Req. Nurse Supervisors	0.8
85 & over 1.9	Othe	-	17.3			Registered Nurses	3.0
03 & 0001 1.9		AL PATIENTS				Licensed Practical Nurses	0.0
Males 61.5% Females		1111111111	150			Home Health Aides	0.0
nated of the females	30.3					Physical Therapists	0.0
PR	IMARY DIAGN	OSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	12.2% Diges	stive Disor	rders 6.4%	Billings \$	194,000	Speech Pathologists	0.0
Cancer	21.2 Genit			Disallowances	27,800	Respiratory Therapists	0.0
Diabetes		. & Childbi		Collections	166,200	Medical Social Workers	0.0
Diseases of Blood	12.2 Arthr	ropathies	3.2	Other	, 0	Other Therapeutic Staff	0.4
Dementia/Alzheimers	0.0 Osteo	-	4.5	Total	166,200	Personal Care Workers	0.0
Psychoses/Neuroses		natal Perio	od 0.0		•	Homemakers	0.0
Central Nervous Sys.		Defined Cor		EXPENSES		Other Staff	0.0
Paralysis/CP	0.0 Fract	ures	1.9	Total \$	276,640	TOTAL FTES	5.2
Cardiovascular	5.1 Wound	ds, Burns	2.6	•	-		
Stroke	0.0 Compl	. of Surge	ery 7.7				
Respiratory	3.8 Other	Condition	ns 12.2				

Oconomowoc Home Health Care LLC

1746 Executive Drive Oconomowoc WI 53118

Waukesha County

COUNTIES SERVED Jefferson Milwaukee Racine

(262

62) 569-5520					Waukesha			
License Number: Ownership of Ac		ited Liabil	lity Compa	nnv			TOTAL NUMBER OF ADMISSIONS	34
Title 18 (Medic Title 19 (Medic Affiliated with Number of undur	care) cert: caid) cert: n a hospita	ified? Y ified? Y al? Y	res res vo	37			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 0.0 0.0 100.0
SERVICES PROVID		NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	9
Skilled Nursi Home Health A Physical Ther Spch/Occ/Resp Medical Socia Private Duty Personal Care Other Home He Homemkr & Oth	Aide capy o Therapy al Service Nursing e/PC RN Supealth Care ner Non HH	0 0 2 1 0 XXXXXXX	108 40 0 0 0 7,088 674 0 7,910	15.4 40.0 0.0 0.0 0.0 0.0 114.3 674.0 0.0 XXXXX			PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	0.0% 0.0 0.0 0.0 100.0
AGE AND SEX OF				RSEMENT SOURCE				
Under 4 4 to 34 35 to 54	0.0% 27.0 62.2	Medi	icare icaid er Federal	2.7% 94.6 . 0.0				
55 to 64	10.8		te Funds	0.0			STAFFING	FTES
65 to 74 75 to 84	0.0		vate Insur E Pay	cance 2.7			Administrators Reg. Nurse Supervisors	0.0
85 & over	0.0	Othe TOTA	-	0.0			Registered Nurses Licensed Practical Nurses	2.5 0.2
Males 59.5%	Females	40.5 %					Home Health Aides Physical Therapists	0.0
	PR	IMARY DIAG	NOSIS		REVENUE		Occupational Therapists	0.0
Infectious Di Cancer Diabetes Diseases of E Dementia/Alzh Psychoses/Neu Central Nervo Paralysis/CP Cardiovascula Stroke Respiratory	Slood neimers uroses ous Sys.	0.0% Diges 0.0 Genit 2.7 Preg 0.0 Arth 0.0 Osteo 16.2 Perin 0.0 Ill-I 10.8 Fract 0.0 Wound 0.0 Compl	stive Disc courinary . & Childh ropathies opathies natal Peri Defined Co tures ds, Burns l. of Surg	Sys. 0.0 pirth 0.0 0.0 0.0 ond 0.0 ond. 0.0 2.7 gery 0.0	Billings \$ Disallowances Collections Other Total EXPENSES Total \$	401,256 120,159 281,097 0 281,097	Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.0 0.0 0.0 0.0 0.0 0.0 0.0 2.6

Lutheran Social Services Home N555A W226 Eastmound Drive	Care		COUNTIES SERVED Jefferson		
Waukesha WI 53186	Waukesha County		Milwaukee Rock		
(262) 896-3444			Walworth Waukesha		
License Number: 220 Ownership of Agency: Nonpo	rofit Church/Corpo	ration	naunopha	TOTAL NUMBER OF ADMISSIONS	41
Title 18 (Medicare) certification Title 19 (Medicaid) certification	fied? Yes			PERCENT ADMISSIONS FROM: Private Residences	65.9%
Affiliated with a hospital				General Hospitals	9.8
Number of unduplicated pat		199		Nursing Homes	12.2
				Other	12.2
	NO. OF NO. OF	VISITS PER		TOTAL NUMBER OF DISCHARGES	
	PATIENTS VISITS	PATIENT		(Including Deaths)	28
Skilled Nursing Home Health Aide	146 3,403 23 3,935	23.3 171.1		PERCENT DISCHARGES TO:	
Physical Therapy	23 3,935	0.0		Private Residences	46.4%
Spch/Occ/Resp Therapy	0 0	0.0		General Hospitals	10.7
Medical Social Service	0 0	0.0		Nursing Homes	3.6
Private Duty Nursing	0 0	0.0		Deaths	14.3
Personal Care/PC RN Sup	v. 302 112,253	371.7		Other	25.0
Other Home Health Care	0 0	0.0			
Homemkr & Other Non HH	0 0	0.0			
TOTAL	XXXXXXX 119,591	XXXXX			
AGE AND SEX OF PATIENTS	PATIENT REIMBU	RSEMENT SOURCE			
Under 4 0.0%	Medicare	1.5%			
4 to 34 37.2	Medicaid	94.6			
35 to 54 38.7	Other Federal	L 0.0			
55 to 64 14.1	State Funds	0.0		STAFFING	FTES
65 to 74 4.0	Private Insu	rance 0.5		Administrators	1.0
75 to 84 4.5	Self Pay	2.0		Reg. Nurse Supervisors	1.0
85 & over 1.5	Other	1.5		Registered Nurses	3.9
	TOTAL PATIENT	rs 204		Licensed Practical Nurses	
Males 48.2% Females 5	51.8 %			Home Health Aides	7.1
ודקם	MARY DIAGNOSIS		REVENUE	Physical Therapists Occupational Therapists	0.0
	0.0% Digestive Disc	orders 0.0%	Billings \$ 2,694		0.0
	1.5 Genitourinary		Disallowances	0 Respiratory Therapists	0.0
	2.5 Preq. & Child		Collections 2,694		0.0
	0.0 Arthropathies	2.5	Other	971 Other Therapeutic Staff	0.0
Dementia/Alzheimers (0.0 Osteopathies	0.5	Total 2,695	,589 Personal Care Workers	122.9
Psychoses/Neuroses 12	2.1 Perinatal Peri	iod 0.0		Homemakers	0.0
2	8.5 Ill-Defined Co		EXPENSES	Other Staff	4.0
<u> </u>	8.6 Fractures	1.0	Total \$ 2,478	,747 TOTAL FTES	140.3
	3.5 Wounds, Burns	3.0			
	2.5 Compl. of Surg				
Respiratory	1.0 Other Condition	ons 41.7			

REM Health of Wisconsin COUNTIES SERVED 124 North Oborn Street, Suite A Brown Waupaca WI 54981 Waupaca County Outagamie Portage (715) 258-2130 Shawano Waupaca License Number: 24 TOTAL NUMBER OF ADMISSIONS 29 Ownership of Agency: Limited Liability Company Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 24.1% Affiliated with a hospital? General Hospitals 37.9 No Number of unduplicated patients in 2004 = 48 Nursing Homes 24.1 Other 13.8 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES PATIENTS VISITS SERVICES PROVIDED PATIENT (Including Deaths) 13 Skilled Nursing 37 611 16.5 Home Health Aide 1 81 81.0 PERCENT DISCHARGES TO: Physical Therapy 3 3 1.0 Private Residences 46.2% Spch/Occ/Resp Therapy 1,308 654.0 General Hospitals 2 30.8 Medical Social Service 0 0.0 Nursing Homes Ω 23.1 Private Duty Nursing 6 850 141.7 Deaths 0.0 Personal Care/PC RN Supv. 8,350 170.4 Other 49 0.0 Other Home Health Care Ω 0 0.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 11,203 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 6.3% Medicare 14.6% 4 to 34 25.0 Medicaid 60.4 35 to 54 Other Federal 29.2 0.0 55 to 64 State Funds STAFFING FTES 6.3 6.3 65 to 74 12.5 Private Insurance 16.7 Administrators 0.3 75 to 84 Req. Nurse Supervisors 12.5 Self Pav 2.1 0.0 85 & over 8.3 Other 0.0 Registered Nurses 3.2 TOTAL PATIENTS 48 Licensed Practical Nurses 5.5 Males 60.4% Females 39.6 % Home Health Aides 0.2 Physical Therapists 0.0 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.0 Infectious Disorders 0.0% Digestive Disorders 6.3% 805,182 Speech Pathologists Billings 0.0 Cancer 4.2 Genitourinary Sys. 0.0 Disallowances 265,742 Respiratory Therapists 0.0 Diabetes 2.1 Preq. & Childbirth 0.0 Collections 539,440 Medical Social Workers 0.0 Diseases of Blood 0.0 Arthropathies Other Other Therapeutic Staff 6.3 0.0 Dementia/Alzheimers 0.0 Osteopathies 0.0 Total 539,440 Personal Care Workers 7.9 6.3 Perinatal Period Homemakers Psvchoses/Neuroses 2.1 0.0 Central Nervous Sys. 10.4 Ill-Defined Cond. EXPENSES Other Staff 8.3 1.5 Paralysis/CP 14.6 Fractures 4.2 Total \$ 605,485 TOTAL FTES 18.5 Cardiovascular 4.2 Wounds, Burns 4.2 Stroke 4.2 Compl. of Surgery 0.0

8.3

Respiratory

14.6 Other Conditions

Preferred Home Health Care

1476 Kenwood Drive Menasha WI 54952

Winnebago County

COUNTIES SERVED
Calumet
Outagamie
Winnebago

(920) 725-1116

License Number: 157 Ownership of Agency: Prop.	orietary Corporatio	on			TOTAL NUMBER OF ADMISSIONS	66
Title 18 (Medicare) certi Title 19 (Medicaid) certi Affiliated with a hospita Number of unduplicated pa	ified? Yes ified? Yes al? No	218		j	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	69.7% 21.2 7.6 1.5
SERVICES PROVIDED Skilled Nursing	NO. OF NO. OF PATIENTS 104 1,397	VISITS PER PATIENT 13.4		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	59
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Sup Other Home Health Care Homemkr & Other Non HH TOTAL	129 21,761 0 0 2 969 0 0 2 421	168.7 0.0 484.5 0.0 210.5 116.4 0.0 0.0 XXXXX		1	PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	55.9% 23.7 3.4 8.5 8.5
AGE AND SEX OF PATIENTS Under 4 2.3% 4 to 34 11.0 35 to 54 17.9	PATIENT REIMBU Medicare Medicaid Other Federa	2.9% 48.2 1 0.0				
55 to 64 9.6 65 to 74 15.1 75 to 84 25.2 85 & over 18.8	State Funds Private Insu Self Pay Other TOTAL PATIEN	0.0 erance 6.2 22.8 19.9		:	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses	FTES 1.0 4.0 5.3 1.2
Males 36.2% Females		115 270			Home Health Aides Physical Therapists	14.9
Infectious Disorders Cancer Diabetes 1 Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular 1 Stroke	IMARY DIAGNOSIS 2.3% Digestive Dis 3.2 Genitourinary 15.6 Preg. & Child 0.0 Arthropathies 8.7 Osteopathies 1.4 Perinatal Per 8.3 Ill-Defined O 9.6 Fractures 1.0 Wounds, Burns 6.9 Compl. of Sur 3.7 Other Conditi	r Sys. 0.9 lbirth 0.0 8 8.3 3.7 riod 0.5 cond. 3.7 1.4 8 4.1 rgery 0.0	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES Total \$	2,031,333 359,140 1,672,193 1,478 1,673,671	Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.0 0.0 0.0 0.0 0.0 0.0 2.2 4.0 32.6

Thedacare At Home		COUNTIES SERVED		
201 Bell Street	777	Brown		
Neenah WI 54957	Winnebago County	Calumet Fond du Lac		
(920) 969-0919		Menominee Oconto		
License Number: 88 Ownership of Agency: No	nnrofit Cornoration		TOTAL NUMBER OF ADMISSIONS	1,329
Title 18 (Medicare) cer Title 19 (Medicaid) cer Affiliated with a hospi Number of unduplicated	tified? Yes tified? Yes tal? Yes		PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	20.9% 70.0 7.3 1.8
SERVICES PROVIDED	NO. OF NO. OF VISITS PER PATIENTS VISITS PATIENT		TOTAL NUMBER OF DISCHARGES (Including Deaths)	1,331
Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN S Other Home Health Care Homemkr & Other Non H TOTAL AGE AND SEX OF PATIENTS	1,372 11,599 8.5 287 3,127 10.9 769 4,776 6.2 424 1,710 4.0 e 86 94 1.1 0 0 0.0 upv. 10 861 86.1 e 14 196 14.0 H 0 0 0.0 XXXXXXX 22,363 XXXXX		PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	81.4% 2.1 5.6 3.7 7.2
Under 4 2.9%	Medicare 72.3%			
4 to 34 5.4	Medicaid 5.3			
35 to 54 11.4	Other Federal 0.0			
55 to 64 11.6	State Funds 0.0		STAFFING	FTES
65 to 74 16.8	Private Insurance 22.1		Administrators	1.0
75 to 84 32.1	Self Pay 0.3		Reg. Nurse Supervisors	1.0
85 & over 19.7	Other 0.0		Registered Nurses	25.4
Males 42.5% Females	TOTAL PATIENTS 1,514		Licensed Practical Nurses Home Health Aides	0.7 7.3
			Physical Therapists	6.0
_	RIMARY DIAGNOSIS	REVENUE	Occupational Therapists	2.2
Infectious Disorders	2.0% Digestive Disorders 3.6%	Billings \$ 2,930,363	Speech Pathologists	0.1
Cancer	9.2 Genitourinary Sys. 2.9	Disallowances 195,036	Respiratory Therapists	0.0
Diabetes	3.2 Preg. & Childbirth 0.1	Collections 2,735,327	Medical Social Workers	0.4
Diseases of Blood	0.4 Arthropathies 3.3	Other 1,398	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.1 Osteopathies 0.9 0.2 Perinatal Period 0.5	Total 2,736,725	Personal Care Workers Homemakers	0.0
Psychoses/Neuroses	0.2 Perinatal Period 0.5 3.3 Ill-Defined Cond. 16.3	EXPENSES	Other Staff	18.0
Central Nervous Sys. Paralysis/CP	0.8 Fractures 1.7	Total \$ 3,072,712	TOTAL FTES	62.0
Cardiovascular	18.6 Wounds, Burns 1.8	10001 7 3,072,712	TOTAL FIED	02.0
Stroke	1.5 Compl. of Surgery 5.6			
Respiratory	9.7 Other Conditions 14.4			

Affinity Visiting Nurses 515 South Washburn Street, S Oshkosh WI 54904	Suite 206 Winnebago County		COUNTIES SERVED Brown Calumet Fond du Lac			
(920) 236-8500			Green Lake			
License Number: 144 Ownership of Agency: Nor Title 18 (Medicare) cert Title 19 (Medicaid) cert	rified? Yes	ion	Manitowoc Outagamie Shawano Waupaca Winnebago	PERCENT A Private	BER OF ADMISSIONS DMISSIONS FROM: Residences	948
Affiliated with a hospit Number of unduplicated p		933		General Nursing Other	Hospitals Homes	69.4 5.1 25.3
SERVICES PROVIDED Skilled Nursing		VISITS PER PATIENT 9.0			BER OF DISCHARGES uding Deaths)	928
Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non He	0 0 upv. 10 372 ≘ 0 0	22.9 6.9 2.5 1.4 0.0 37.2 0.0 0.0		Private	ISCHARGES TO: Residences Hospitals Homes	75.9% 3.0 4.3 3.4 13.4
AGE AND SEX OF PATIENTS Under 4 1.3% 4 to 34 4.0 35 to 54 10.1 55 to 64 9.0 65 to 74 19.5	PATIENT REIMBURSE Medicare Medicaid Other Federal State Funds Private Insuran	76.6% 5.3 0.0 0.0		STAFFING Adminis	trators	FTES 1.0
75 to 84 32.8 85 & over 23.4 Males 40.9% Females	Self Pay Other TOTAL PATIENTS	1.0 0.8 933		Reg. Nu Registe License Home He	rse Supervisors red Nurses d Practical Nurses alth Aides	1.0 11.7 1.8 1.7
PI	RIMARY DIAGNOSIS		REVENUE		l Therapists ional Therapists	0.8
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke Respiratory	0.3% Digestive Disord 2.8 Genitourinary Sy 2.3 Preg. & Childbir 0.4 Arthropathies 0.1 Osteopathies 0.5 Perinatal Period 0.4 Ill-Defined Cond 0.0 Fractures 9.1 Wounds, Burns 0.9 Compl. of Surger 6.9 Other Conditions	rs. 1.1 oth 0.2 1.0 0.5 l 0.4 l. 2.6 0.1 1.3 ry 2.1	Disallowances Collections 1,8 Other Total 1,8 EXPENSES	820,732 Speech -20,722 Respira 841,454 Medical 1,333 Other T	Pathologists tory Therapists Social Workers herapeutic Staff l Care Workers ers taff	0.0 0.0 0.8 0.0 0.6 0.0 2.8 25.5

Clarity Care 424 Washington Avenue Oshkosh WI 54901 (920) 236-6567 License Number: 214 Ownership of Agency: Non Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? Yes ified? Yes al? No	474	COUNTIES SERVED Brown Calumet Fond du Lac Oconto Outagamie Portage Waupaca Winnebago	TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	111 73.0% 5.4 8.1 13.5
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN Su Other Home Health Care Homemkr & Other Non HH	0 0 pv. 556 162,286 0 0	VISITS PER PATIENT 34.2 204.5 14.8 24.4 0.0 0.0 291.9 0.0 160.7 XXXXX		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	91 49.5% 2.2 14.3 5.5 28.6
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys.	PATIENT REIMBUR Medicare Medicaid Other Federal State Funds Private Insur Self Pay Other TOTAL PATIENT 53.2 % EIMARY DIAGNOSIS 0.8% Digestive Diso 1.3 Genitourinary 6.5 Preg. & Childb 1.1 Arthropathies 1.1 Osteopathies 1.1 Osteopathies 7.6 Perinatal Peri 5.5 Ill-Defined Co 13.3 Fractures 5.1 Wounds, Burns 3.4 Compl. of Surg 2.3 Other Condition	6.2% 66.5 0.0 0.0 ance 0.9 4.9 21.4 S 529 rders 0.8% Sys. 0.4 irth 0.2 9.1 1.1 od 0.2 nd. 5.5 2.3 2.7 ery 0.0	REVENUE Billings \$ 5,488, Disallowances 1,418, Collections 4,070, Other 514, Total 4,585, EXPENSES Total \$ 5,171,	501 Respiratory Therapists 426 Medical Social Workers 999 Other Therapeutic Staff 425 Personal Care Workers Homemakers Other Staff	FTES 1.0 2.0 7.2 3.9 20.9 0.0 0.0 0.0 0.0 23.5 8.8 7.0 74.3

Homemakers Inc of Oshkosh 2020 West 9th Avenue, Box 21 Oshkosh WI 54904 (920) 233-2080 License Number: 17 Ownership of Agency: Pro Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	Winned winner with the control of th	Yes Yes No		COUNTIES SERVED Brown Calumet Dodge Door Fond du Lac Green Jefferson Kewaunee Marathon Oconto Outagamie Portage		TOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	209 91.4% 2.9 1.4 4.3
SERVICES PROVIDED Skilled Nursing Home Health Aide Physical Therapy Spch/Occ/Resp Therapy Medical Social Service Private Duty Nursing Personal Care/PC RN St Other Home Health Care Homemkr & Other Non He	28 28 upv. 778 e (5,132 8 27,406 0 0 8 833 0 0 8 3,496	VISITS PER PATIENT 36.4 214.1 0.0 104.1 0.0 124.9 242.0 0.0 73.0 XXXXX	Shawano Sheboygan Washington Waukesha Waushara Winnebago Wood		TOTAL NUMBER OF DISCHARGES (Including Deaths) PERCENT DISCHARGES TO: Private Residences General Hospitals Nursing Homes Deaths Other	156 67.9% 5.8 12.8 4.5 9.0
Infectious Disorders Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses	Me M	edicare edicaid ther Federal tate Funds rivate Insura elf Pay ther DTAL PATIENTS AGNOSIS gestive Dison nitourinary S eg. & Childbe thropathies teopathies rinatal Perio	0.0 ance 2.3 7.7 3.8 S 650 rders 1.4% Sys. 2.5 irth 0.0 7.4 3.2 od 2.3 nd. 0.6 1.1 0.5 ery 0.2	REVENUE Billings \$ Disallowances Collections Other Total EXPENSES	8,534,341 1,775,510 6,758,831 0 6,758,831	STAFFING Administrators Reg. Nurse Supervisors Registered Nurses Licensed Practical Nurses Home Health Aides Physical Therapists Occupational Therapists Speech Pathologists Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	FTES 0.4 11.1 8.6 11.8 28.0 0.0 0.0 0.0 0.0 44.7 7.9 13.5 125.9

Ministry Home Care Home Heal	th - March	field		COUNTIES SERVED			
303 West Upham Street, Suite		IIeIu		Adams			
Marshfield WI 54449	Wood C	ountr		Chippewa			
Maishileid Wi 34449	wood c	Ouricy		Clark			
(715) 387-9685				Lincoln			
(,,				Marathon			
License Number: 182				Oneida		TOTAL NUMBER OF ADMISSIONS	1,363
Ownership of Agency: Non	profit Chu	rch/Corpora	tion	Portage			1,555
Title 18 (Medicare) cert		Yes	.01011	Shawano		PERCENT ADMISSIONS FROM:	
Title 19 (Medicaid) cert		Yes		Taylor		Private Residences	3.4%
Affiliated with a hospit		Yes		Vilas		General Hospitals	71.8
Number of unduplicated p			1,397	Waupaca		Nursing Homes	7.4
Namber of anapricated p	ACTORED III	2001 -	1,33,	Waushara		Other	17.3
				Wood		Oction	17.5
	NO. OF	NO. OF	VISITS PER	nood		TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	1,337
Skilled Nursing	1,307	24,598	18.8			(Including Deacing)	1,33,
Home Health Aide	263	10,148	38.6			PERCENT DISCHARGES TO:	
Physical Therapy	509	13,101	25.7			Private Residences	74.9%
Spch/Occ/Resp Therapy	311	10,723	34.5			General Hospitals	3.7
Medical Social Service		178	1.6			Nursing Homes	4.7
Private Duty Nursing		0	0.0			Deaths	3.2
Personal Care/PC RN Su		3,346	54.0			Other	13.4
Other Home Health Care		0	0.0			Oction	13.1
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXX	62,094	XXXXX				
1011111		02,001					
AGE AND SEX OF PATIENTS	PATIE	NT REIMBURS	EMENT SOURCE				
Under 4 1.4%	Med	icare	67.9%				
4 to 34 3.6	Med	icaid	16.2				
35 to 54 8.7	Oth	er Federal	0.0				
55 to 64 9.2	Sta	te Funds	1.6			STAFFING	FTES
65 to 74 16.5	Pri	vate Insura	nce 12.9			Administrators	1.0
75 to 84 31.4	Sel	f Pay	1.4			Reg. Nurse Supervisors	3.0
85 & over 29.2	Oth	er	0.1			Registered Nurses	14.2
	TOT	AL PATIENTS	1,397			Licensed Practical Nurses	0.2
Males 56.8% Females	43.2 %					Home Health Aides	3.7
						Physical Therapists	2.0
	IMARY DIAG			REVENUE		Occupational Therapists	0.6
Infectious Disorders		stive Disor		Billings \$		Speech Pathologists	0.6
Cancer		tourinary S		Disallowances	397,307	Respiratory Therapists	0.0
Diabetes		. & Childbi		Collections	2,832,927	Medical Social Workers	0.8
Diseases of Blood		ropathies	1.8	Other	16,005	Other Therapeutic Staff	0.6
Dementia/Alzheimers	0.2 Oste	-	0.7	Total	2,848,932	Personal Care Workers	0.0
Psychoses/Neuroses		natal Perio				Homemakers	0.0
Central Nervous Sys.		Defined Con		EXPENSES		Other Staff	4.6
Paralysis/CP	0.4 Frac		0.7	Total \$	3,422,904	TOTAL FTES	31.3
	10.2 Woun	•	1.3				
Stroke		1. of Surge					
Respiratory	4.7 Othe	r Condition	s 61.4				

Page 131 Cercy Home Care Dubuque COUNTIES SERVED

Mercy Home Care DubuqueCOUNTIES SERV250 Mercy DriveGrantDubuque IA 52001Out of StateLafayette

(563) 589-8118

63) 589-8118						
License Number: 197 Ownership of Agency: Nor	nprofit Private			:	TOTAL NUMBER OF ADMISSIONS	145
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	cified? Yes cified? Yes L? Yes	140		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	2.1% 95.9 2.1 0.0
SERVICES PROVIDED	NO. OF NO. OF V	VISITS PER PATIENT		:	TOTAL NUMBER OF DISCHARGES (Including Deaths)	142
Skilled Nursing	140 1,151	8.2			(Including Deacing)	112
Home Health Aide	17 290	17.1]	PERCENT DISCHARGES TO:	
Physical Therapy	86 496	5.8			Private Residences	93.7%
Spch/Occ/Resp Therapy	24 85	3.5			General Hospitals	0.0
Medical Social Service	5 6	1.2			Nursing Homes	2.1
Private Duty Nursing	0 0	0.0			Deaths	0.7
Personal Care/PC RN Su		0.0			Other	3.5
Other Home Health Care		0.0				
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 2,028	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBURS	EMENT SOURCE				
Under 4 0.7%	Medicare	63.1%				
4 to 34 3.6	Medicaid	0.7				
35 to 54 5.7	Other Federal	0.0				
55 to 64 20.7	State Funds	0.0		:	STAFFING	FTES
65 to 74 30.0	Private Insurar	nce 36.2			Administrators	0.0
75 to 84 28.6	Self Pay	0.0			Reg. Nurse Supervisors	0.1
85 & over 10.7	Other	0.0			Registered Nurses	0.6
	TOTAL PATIENTS	141			Licensed Practical Nurses	0.0
Males 47.9% Females	52.1 %				Home Health Aides	0.2
D	TWARY DIAGNOGIG		DEVENIE		Physical Therapists	0.1
Infectious Disorders	RIMARY DIAGNOSIS 0.0% Digestive Disord	ders 0.0%	REVENUE Billings \$	204,841	Occupational Therapists Speech Pathologists	0.0
Cancer	2.1 Genitourinary Sy		Disallowances	204,841	Respiratory Therapists	0.0
Diabetes	0.7 Preq. & Childbin	2	Collections	184,471	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies	0.7	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopathies	0.0	Total	184,471	Personal Care Workers	0.0
Psychoses/Neuroses	2.1 Perinatal Period			,	Homemakers	0.0
Central Nervous Sys.	0.0 Ill-Defined Cond		EXPENSES		Other Staff	0.5
Paralysis/CP	0.0 Fractures	0.0	Total \$	110,516	TOTAL FTES	1.5
Cardiovascular	7.9 Wounds, Burns	0.7				
Cardiovascular Stroke Respiratory	7.9 Wounds, Burns 2.1 Compl. of Surger 5.0 Other Conditions	ry 2.9				

Interim Healthcare Lake Superior 227 West First Street

Duluth MN 55802

Out of State

COUNTIES SERVED Barron Douglas

(218) 722-0053

10, 722 0033						
License Number: 284 Ownership of Agency: Pro	oprietary Corporation	nn		ı	TOTAL NUMBER OF ADMISSIONS	33
Title 18 (Medicare) certainted 19 (Medicaid) certaffiliated with a hospit Number of unduplicated p	tified? Yes tified? Yes tal? No	62			PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	75.8% 15.2 9.1 0.0
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	28
Skilled Nursing	53 1,005	19.0			(Including Deachs)	20
Home Health Aide	5 84	16.8			PERCENT DISCHARGES TO:	
Physical Therapy	4 21	5.3			Private Residences	32.1%
Spch/Occ/Resp Therapy		182.0			General Hospitals	10.7
Medical Social Service		0.0			Nursing Homes	17.9
Private Duty Nursing	2 47	23.5			Deaths	10.7
Personal Care/PC RN Si		108.0			Other	28.6
Other Home Health Care		3.0				
Homemkr & Other Non H	H 20 124	6.2				
TOTAL	XXXXXXX 2,336	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMB	JRSEMENT SOURCE				
Under 4 3.2%	Medicare	6.5%				
4 to 34 4.8	Medicaid	54.5				
35 to 54 8.1	Other Federa					
55 to 64 19.4	State Funds				STAFFING	FTES
65 to 74 9.7	Private Ins	irance 3.9			Administrators	0.1
75 to 84 21.0	Self Pay	6.5			Req. Nurse Supervisors	1.0
85 & over 33.9	Other	5.2			Registered Nurses	0.7
	TOTAL PATIE	NTS 77			Licensed Practical Nurses	0.0
Males 38.7% Females	61.3 %				Home Health Aides	0.0
					Physical Therapists	0.0
	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	<u> </u>		Billings \$	236,046	Speech Pathologists	0.0
Cancer	3.2 Genitourinar		Disallowances	44,370	Respiratory Therapists	0.0
Diabetes	11.3 Preg. & Chile		Collections	191,676	Medical Social Workers	0.0
Diseases of Blood	1.6 Arthropathie		Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	1.6 Osteopathies	3.2	Total	191,676	Personal Care Workers	2.7
Psychoses/Neuroses	11.3 Perinatal Per				Homemakers	0.0
Central Nervous Sys.			EXPENSES	100 001	Other Staff	0.0
Paralysis/CP	4.8 Fractures	1.6	Total \$	190,881	TOTAL FTES	4.5
Cardiovascular	9.7 Wounds, Burns					
Stroke	3.2 Compl. of Su: 6.5 Other Condit:					
Respiratory	6.5 Other Conditi	10115 22.6				

Page 133 COUNTIES SERVED

St. Lukes Home Health Services

Douglas

220 North 6th Avenue East

Duluth MN 55805 Out of State

(218) 249-6111

ion		TOTAL NUMBER OF ADMISSIONS	53
k = 61		PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 75.5 0.0 24.5
OF VISITS PER		TOTAL NUMBER OF DISCHARGES (Including Deaths)	58
		DEDGENM DIGGUI DOEG MO	
			01 09
			81.0% 5.2
		<u> </u>	10.3
			0.0
			3.4
		OCHCI	3.4
EIMBURSEMENT SOURCE 66.7% d 4.8			
		STAFFING	FTES
			0.0
			0.0
			0.2
ATIENTS 63			0.0
		Home Health Aides	0.1
		Physical Therapists	0.3
3	REVENUE	Occupational Therapists	0.1
e Disorders 0.0% Enary Sys. 3.3 Childbirth 0.0 Chies 6.6 nies 3.3 E Period 0.0 ned Cond. 23.0 s 3.3 Burns 4.9 E Surgery 4.9 nditions 9.8	Disallowances Collections 237 Other Total 237 EXPENSES	0 Respiratory Therapists 429 Medical Social Workers 0 Other Therapeutic Staff 429 Personal Care Workers Homemakers Other Staff	0.0 0.0 0.0 0.0 0.0 0.0 0.0
	OF VISITS PER ITS PATIENT 755 16.4 504 29.6 437 10.9 45 4.1 10 1.1 0 0.0 0 0.0 0 0.0 0 0.0 751 XXXXX IMBURSEMENT SOURCE 66.7% 4.8 deral 0.0 Insurance 27.0 1.6 0.0 IIENTS 63 Disorders 0.0% hary Sys. 3.3 hildbirth 0.0 hies 6.6 ies 3.3 Period 0.0 ed Cond. 23.0 arns 4.9 Surgery 4.9	## OF VISITS PER ITS PATIENT	PERCENT ADMISSIONS FROM:

Page 134 St. Marys Home Health 516 East Fourth Street COUNTIES SERVED Douglas

Duluth MN 55805

Out of State

(218) 786-4004

10) /00-4004											
License Number: Ownership of Ag		nrofit	- Driv	rat o						TOTAL NUMBER OF ADMISSIONS	122
Title 18 (Medic Title 19 (Medic Department of a Number of undup	are) cert aid) cert hospital	ified? ified? ?	? Y ? Y Y	es es es	135					PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.8% 70.5 0.8 27.9
		NO.	OF	NO. OF	VISIT	'S PER				TOTAL NUMBER OF DISCHARGES	
SERVICES PROVID	ED	PATII	ENTS	VISITS	PATI					(Including Deaths)	121
Skilled Nursi	.nq		118	1,184	10	.0				, ,	
Home Health A			20	582	29	.1				PERCENT DISCHARGES TO:	
Physical Ther	apy		38	303	8	.0				Private Residences	77.7%
Spch/Occ/Resp	Therapy		22	88	4	. 0				General Hospitals	14.0
Medical Socia	l Service		7	10	1	. 4				Nursing Homes	0.0
Private Duty	Nursing		0	0	0	.0				Deaths	0.0
Personal Care			0	0		.0				Other	8.3
Other Home He			0	0		.0					
Homemkr & Oth	er Non HH		0	0		.0					
TOTAL		XXXX	XXXX	2,167	XXX	XX					
AGE AND SEX OF	PATTENTS	1	O A TT EN	T REIMBUR	SEMENT	SOURCE					
Under 4	10.4%	-		care		39.0%					
4 to 34	17.0		Medi			27.4					
35 to 54	11.9			r Federal		0.0					
55 to 64	15.6			e Funds		0.0				STAFFING	FTES
65 to 74	8.9		Priv	ate Insur	ance	13.7				Administrators	0.2
75 to 84	23.0		Self	Pay		14.4				Req. Nurse Supervisors	0.6
85 & over	13.3		Othe	r		5.5				Registered Nurses	2.2
			TOTA	L PATIENT	'S	146				Licensed Practical Nurses	0.4
Males 40.7%	Females	59.3	%							Home Health Aides	1.0
										Physical Therapists	1.0
		IMARY						REVENUE		Occupational Therapists	0.6
Infectious Di	.sorders			tive Disc		3.7%	Billin		271,265	Speech Pathologists	0.6
Cancer				ourinary		0.7		owances	92,348	Respiratory Therapists	0.0
Diabetes				& Childb	oirth	3.0	Collec	tions	178,917	Medical Social Workers	0.2
Diseases of B				opathies		3.7	Other		0	Other Therapeutic Staff	0.6
Dementia/Alzh				pathies		2.2	Total		178,917	Personal Care Workers	0.0
Psychoses/Neu Central Nervo				atal Peri efined Co		0.0 4.4		EXPENSES		Homemakers Other Staff	0.0 1.0
Paralysis/CP	ua aya.		Fract		nia.	0.7	Total	EAPENSES \$	286,909	TOTAL FTES	8.4
Cardiovascula	r			ls, Burns		3.7	IUCAI	ų	200,909	TOTAL LIED	0.4
Stroke	·			. of Suro	erv	6.7					
Respiratory				Condition		45.2					
respiratory			5 01101	201141 010							

Page 135 Dickinson Home Health COUNTIES SERVED

617 North Stephenson Avenue Iron Mountain MI 49801

Out of State

Florence Forest Marinette

(906) 779-7820

License Number: 314 Ownership of Agency: Cou	intv					TOTAL NUMBER OF ADMISSIONS	96
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	cified? cified? c:?	Yes Yes Yes 2004 =	92		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	96.9% 0.0 2.1 1.0
SERVICES PROVIDED Skilled Nursing	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT 12.3		1	TOTAL NUMBER OF DISCHARGES (Including Deaths)	102
Home Health Aide	20	213	10.7			PERCENT DISCHARGES TO:	
Physical Therapy	44	474	10.8			Private Residences	90.2%
Spch/Occ/Resp Therapy	14	40	2.9			General Hospitals	2.9
Medical Social Service	4	4	1.0			Nursing Homes	1.0
Private Duty Nursing	0	0	0.0			Deaths	3.9
Personal Care/PC RN Su		0	0.0			Other	2.0
Other Home Health Care	-	0	0.0				
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXXX	1,664	XXXXX				
AGE AND SEX OF PATIENTS	ם איד די	T DETMRITE	SEMENT SOURCE				
Under 4 2.2%		icare	68.5%				
4 to 34 5.4		icaid	9.8				
35 to 54 10.9		er Federal					
55 to 64 17.4		te Funds	0.0			STAFFING	FTES
65 to 74 19.6	Pri	vate Insur	cance 21.7			Administrators	1.0
75 to 84 29.3	Sel:	f Pay	0.0			Reg. Nurse Supervisors	1.0
85 & over 15.2	Oth	er	0.0			Registered Nurses	1.5
		AL PATIENT	.'S 92			Licensed Practical Nurses	0.0
Males 40.2% Females	59.8 %					Home Health Aides	0.2
						Physical Therapists	2.3
Infectious Disorders	RIMARY DIAG		andona 4 20	REVENUE	242 270	Occupational Therapists	0.0
Cancer	2.2% Dige:	scive bisc tourinary		Billings \$ Disallowances	242,278 -18,958	Speech Pathologists Respiratory Therapists	0.0
Diabetes		. & Childh		Collections	261,236	Medical Social Workers	0.0
Diseases of Blood		. & Child ropathies	13.0	Other	201,230	Other Therapeutic Staff	0.0
Dementia/Alzheimers		pathies	2.2	Total	261,460	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri			_0_,100	Homemakers	0.0
Central Nervous Sys.	0.0 Ill-1	Defined Co	ond. 16.3	EXPENSES		Other Staff	1.2
Paralysis/CP	2.2 Fract	tures	9.8	Total \$	256,160	TOTAL FTES	7.1
Cardiovascular	9.8 Wound	ds, Burns	6.5	•	•		
Stroke		l. of Surg					
Respiratory	3.3 Othe:	r Conditic	ons 2.2				

United Home Care COUNTIES SERVED Page 136

927 Riverside Plaza Florence
Iron River MI 49935 Out of State Forest
Vilas

(906) 265-6118

700) 203-0110							
License Number: 1013 Ownership of Agency: Nor	nprofit Corr	oration			•	TOTAL NUMBER OF ADMISSIONS	18
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	zified? Y zified? Y zal? Y	les les les	19		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	5.6% 61.1 0.0 33.3
	NO. OF	NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	16
Skilled Nursing	19	158	8.3			_	
Home Health Aide	3	38	12.7			PERCENT DISCHARGES TO:	
Physical Therapy	8	98	12.3			Private Residences	68.8%
Spch/Occ/Resp Therapy		11	2.2			General Hospitals	0.0
Medical Social Service	e 0	0	0.0			Nursing Homes	0.0
Private Duty Nursing	0	0	0.0			Deaths	12.5
Personal Care/PC RN Su		0	0.0			Other	18.8
Other Home Health Care		0	0.0				
Homemkr & Other Non H		0	0.0				
TOTAL	XXXXXXX	305	XXXXX				
AGE AND SEX OF PATIENTS	סאידיניא	ייי ספידאיםוום	SEMENT SOURCE				
Under 4 0.0%		care	80.0%				
4 to 34 0.0		caid	0.0				
35 to 54 10.5		er Federal					
55 to 64 15.8		e Funds	0.0			STAFFING	FTES
65 to 74 10.5		ate Insur				Administrators	0.0
75 to 84 36.8	Self	Pay	0.0			Req. Nurse Supervisors	0.0
85 & over 26.3	Othe	4	0.0			Registered Nurses	0.2
	TOTA	AL PATIENT	'S 20			Licensed Practical Nurses	0.0
Males 52.6% Females	47.4 %					Home Health Aides	0.0
						Physical Therapists	0.0
	RIMARY DIAGN			REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Diges			Billings \$	32,832	Speech Pathologists	0.0
Cancer	10.5 Genit			Disallowances	-7,193	Respiratory Therapists	0.0
Diabetes	10.5 Preg.			Collections	40,025	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthr		15.8	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteo		0.0	Total	40,025	Personal Care Workers	0.0
Psychoses/Neuroses	0.0 Perin			EXPENSES		Homemakers	0.0
Central Nervous Sys. Paralysis/CP	0.0 III-L		ond. 10.5 0.0	Total \$	24,062	Other Staff TOTAL FTES	0.0 0.2
Cardiovascular	10.5 Wound		15.8	ıocaı ş	24,002	TOTAL FIED	0.2
Stroke	0.0 Compl						
Respiratory	5.3 Other						
respiracory	J.J CCIICI	. COMMICIC	13.0				

Page 137 Caring Home Health N10567 Grandview Lane COUNTIES SERVED Iron

Ironwood MI 49938 Out of State

(800) 932-1234

License Number: 190 Ownership of Agency: Nor	profit Cor	poration				TOTAL NUMBER OF ADMISSIONS	101
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	ified? cified? c?	Yes Yes Yes	102		•	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	32.7% 49.5 17.8 0.0
SERVICES PROVIDED Skilled Nursing	NO. OF PATIENTS	NO. OF VISITS 1,174	VISITS PER PATIENT 11.7			TOTAL NUMBER OF DISCHARGES (Including Deaths)	110
Home Health Aide	35	1,174 574	16.4			PERCENT DISCHARGES TO:	
Physical Therapy	49	314	6.4		•	Private Residences	83.6%
Spch/Occ/Resp Therapy	8	314	3.8			General Hospitals	8.2
Medical Social Service		0	0.0			Nursing Homes	5.5
Private Duty Nursing	0	0	0.0			Deaths	0.9
Personal Care/PC RN Su	-	934	71.8			Other	1.8
Other Home Health Care		0	0.0			001101	
Homemkr & Other Non H		0	0.0				
TOTAL	XXXXXXX	3,026	XXXXX				
AGE AND SEX OF PATIENTS Under 4 0.0%		NT REIMBUR icare	SEMENT SOURCE 83.2%				
4 to 34 1.0		icare icaid	10.3				
35 to 54 3.9		rcard er Federal					
55 to 64 8.8		er Federar te Funds	0.0			STAFFING	FTES
65 to 74 17.6		vate Insur			'	Administrators	0.1
75 to 84 38.2		f Pay	0.0			Req. Nurse Supervisors	2.0
85 & over 30.4	Oth	4	0.9			Registered Nurses	0.8
	TOT	AL PATIENT				Licensed Practical Nurses	0.0
Males 24.5% Females	75.5 %					Home Health Aides	0.4
						Physical Therapists	0.0
	RIMARY DIAG			REVENUE		Occupational Therapists	0.0
Infectious Disorders		stive Diso		Billings \$	215,827	Speech Pathologists	0.0
Cancer		tourinary		Disallowances	9,727	Respiratory Therapists	0.0
Diabetes		. & Childb		Collections	206,100	Medical Social Workers	0.0
Diseases of Blood		ropathies	4.9	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers		opathies	2.0	Total	206,100	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri				Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES	151 000	Other Staff	3.8
Paralysis/CP	0.0 Frac		3.9	Total \$	151,002	TOTAL FTES	7.0
	15.7 Woun		1.0				
Stroke	_	1. of Surg	_				
Respiratory	8.8 Othe	r Conditio	ns 45.1				

Page 138

Marquette General Home Health 800 East Boulevard

Kingsford MI 49802

Out of State

COUNTIES SERVED Florence Forest Marinette Oconto

(906) 779-1844

006) 779-1844				Oconto			
License Number: 207 Ownership of Agency: Non	nprofit Cor	poration				TOTAL NUMBER OF ADMISSIONS	191
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	ified? ified? .?	Yes Yes Yes	231		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	14.1% 82.7 3.1 0.0
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	187
Skilled Nursing	231	3,442	14.9				
Home Health Aide	46	2,080	45.2		:	PERCENT DISCHARGES TO:	
Physical Therapy	11	480	43.6			Private Residences	71.1%
Spch/Occ/Resp Therapy	4	17	4.3			General Hospitals	10.2
Medical Social Service		44	2.0			Nursing Homes	8.0
Private Duty Nursing Personal Care/PC RN Su	1 10v. 0	144 0	144.0			Deaths Other	7.5 3.2
Other Home Health Care		0	0.0			Other	3.4
Homemkr & Other Non HH		0	0.0				
TOTAL	XXXXXXX	6,207	XXXXX				
101112		0,20,					
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUR	RSEMENT SOURCE				
Under 4 2.2%	Med	icare	70.4%				
4 to 34 4.8	Med	icaid	9.1				
35 to 54 14.3		er Federal					
55 to 64 8.7		te Funds	0.0			STAFFING	FTES
65 to 74 16.9		vate Insur				Administrators	1.0
75 to 84 32.9		f Pay	0.0			Reg. Nurse Supervisors	0.4
85 & over 20.3	Oth		0.0			Registered Nurses	4.0
		AL PATIENT	TS 243			Licensed Practical Nurses	1.0
Males 46.3% Females	53.7 %					Home Health Aides	2.0
תת	RIMARY DIAG	NOCTC		REVENUE		Physical Therapists	0.5 0.0
Infectious Disorders		NOSIS stive Disc	orders 9.5%	Billings \$	999,317	Occupational Therapists Speech Pathologists	0.0
Cancer		tourinary		Disallowances	199,863	Respiratory Therapists	0.0
Diabetes		. & Childh	2	Collections	799,454	Medical Social Workers	0.4
Diseases of Blood	2.6 Arth		10.4	Other	0 , 434	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.4 Oste		13.0	Total	799,454	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri		10001		Homemakers	0.0
Central Nervous Sys.		Defined Co		EXPENSES		Other Staff	1.0
Paralysis/CP	1.7 Frac		2.2	Total \$	720,013	TOTAL FTES	10.3
	10.0 Woun	ds, Burns	5.6	·			
Stroke	1.3 Comp						
Respiratory	8.7 Othe	r Conditio	ons 0.0				

Page 139 Hiawatha Homecare COUNTIES SERVED

4920 Moundview Drive, Suite B Red Wing MN 55066

Out of State

Pepin Pierce St. Croix

(651) 388-2223

51) 388-2223							
License Number: 340 Ownership of Agency: Pro	prietary C	orporation	1		•	TOTAL NUMBER OF ADMISSIONS	12
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? ified? al?	Yes Yes No	14		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	16.7% 75.0 0.0 8.3
	NO. OF	NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS	VISITS	PATIENT			(Including Deaths)	10
Skilled Nursing	13	146	11.2				
Home Health Aide	2	438	219.0		1	PERCENT DISCHARGES TO:	
Physical Therapy	3	9	3.0			Private Residences	70.0%
Spch/Occ/Resp Therapy	1	693	693.0			General Hospitals	20.0
Medical Social Service	e 0 2	0 161	0.0 80.5			Nursing Homes Deaths	0.0
Private Duty Nursing Personal Care/PC RN Su		101	0.0			Other	10.0
Other Home Health Care	.p.,	58	29.0			Ochei	0.0
Homemkr & Other Non HH		2	2.0				
TOTAL	XXXXXXX	1,507	XXXXX				
AGE AND SEX OF PATIENTS			RSEMENT SOURCE				
Under 4 21.4% 4 to 34 14.3		icare icaid	7.1% 28.6				
4 to 34 14.3 35 to 54 21.4		icald er Federal					
55 to 64 21.4		er Federal te Funds	0.0		9	STAFFING	FTES
65 to 74 0.0		vate Insur			•	Administrators	0.0
75 to 84 7.1		f Pav	0.0			Req. Nurse Supervisors	0.0
85 & over 14.3	Oth	4	0.0			Registered Nurses	0.4
	TOT.	AL PATIENT	TS 14			Licensed Practical Nurses	1.6
Males 50.0% Females	50.0 %					Home Health Aides	1.1
						Physical Therapists	0.0
	IMARY DIAG			REVENUE	F20 000	Occupational Therapists	0.0
Infectious Disorders Cancer		stive Disc tourinary	orders 14.3% Sys. 0.0	Billings \$ Disallowances	532,908 287,243	Speech Pathologists Respiratory Therapists	0.0
Diabetes		. & Childb		Collections	287,243 245,665	Medical Social Workers	0.0
Diseases of Blood	7.1 Arth		0.0	Other	245,665	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Oste		7.1	Total	245,665	Personal Care Workers	0.0
Psychoses/Neuroses		natal Peri			,	Homemakers	0.0
	14.3 Ill-			EXPENSES		Other Staff	0.5
Paralysis/CP	0.0 Frac		7.1	Total \$	165,744	TOTAL FTES	3.6
Cardiovascular	7.1 Woun		7.1				
Stroke		l. of Surg					
Respiratory	7.1 Othe	r Conditic	ons 7.1				

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Red Wing Regional Home Health 1407 West 4th Street, Box 134 Red Wing MN 55066

Out of State

(651) 385-	34:	10
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551) 385-3410								
License Number: 215 Ownership of Agency: Nor							TOTAL NUMBER OF ADMISSIONS	47
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	ified? al?	Yes Yes Yes s in 2004 =	44			1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 61.7 8.5 29.8
	NO. C	OF NO. OF	VISITS	PER		•	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIEN		PATIE				(Including Deaths)	46
Skilled Nursing		35 201	5.					
Home Health Aide		12 294	24.			1	PERCENT DISCHARGES TO:	
Physical Therapy		20 207	10.				Private Residences	71.7%
Spch/Occ/Resp Therapy		8 125	15.				General Hospitals	0.0
Medical Social Service	<u> </u>	0 0	0.	-			Nursing Homes	13.0
Private Duty Nursing Personal Care/PC RN Su		0 0	0.				Deaths Other	0.0 15.2
Other Home Health Care		0 0	0.	-			Other	15.2
Homemkr & Other Non H		1 4	4.					
TOTAL	XXXXX		XXXX					
AGE AND SEX OF PATIENTS	P.	ATIENT REIMBUR	SEMENT	SOURCE				
Under 4 0.0%		Medicare		56.8%				
4 to 34 6.8		Medicaid		4.5				
35 to 54 13.6		Other Federal		0.0				
55 to 64 22.7		State Funds		0.0		:	STAFFING	FTES
65 to 74 20.5		Private Insur	ance	13.6			Administrators	0.1
75 to 84 25.0		Self Pay		4.5			Reg. Nurse Supervisors	0.1
85 & over 11.4		Other TOTAL PATIENT	10	20.5 44			Registered Nurses Licensed Practical Nurses	0.3
Males 59.1% Females	40 Q 9		.5	44			Home Health Aides	0.0
Males 39.1% remales	40.5 3	ō					Physical Therapists	0.4
PR	IMARY I	DIAGNOSIS			REVENUE		Occupational Therapists	0.0
Infectious Disorders			rders	2.3%	Billings \$	130,267	Speech Pathologists	0.0
		Genitourinary		0.0	Disallowances	13,505	Respiratory Therapists	0.0
Diabetes	6.8 E	Preg. & Chiladb	irth	0.0	Collections	116,762	Medical Social Workers	0.0
Diseases of Blood	0.0 A	Arthropathies		2.3	Other	7,633	Other Therapeutic Staff	0.0
Dementia/Alzheimers		Osteopathies		0.0	Total	124,395	Personal Care Workers	0.0
Psychoses/Neuroses		Perinatal Peri		0.0			Homemakers	0.1
Central Nervous Sys.		Ill-Defined Co	nd.	9.1	EXPENSES		Other Staff	0.2
Paralysis/CP		Fractures		9.1	Total \$	140,387	TOTAL FTES	1.2
		Wounds, Burns		0.0				
Stroke		Compl. of Surg Other Conditio		9.1				
Respiratory	J.1 (orner condition	nis.	0.0				

COUNTIES SERVED Pierce

Page 141 COUNTIES SERVED

Interim Healthcare Rockford

5411 East State Street, Suite 212 Rockford IL 61108 Out Out of State Rock Walworth

(800)	427-4433
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100) 427-4433						
License Number: 248 Ownership of Agency: Pro	oprietary Corporation	1		•	TOTAL NUMBER OF ADMISSIONS	12
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	tified? Yes tified? Yes tal? No	16		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	8.3% 50.0 33.3 8.3
	NO. OF NO. OF	VISITS PER			TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED	PATIENTS VISITS	PATIENT			(Including Deaths)	12
Skilled Nursing	11 59	5.4			(======================================	
Home Health Aide	4 30	7.5		:	PERCENT DISCHARGES TO:	
Physical Therapy	4 147	36.8			Private Residences	58.3%
Spch/Occ/Resp Therapy	0 0	0.0			General Hospitals	8.3
Medical Social Service		0.0			Nursing Homes	25.0
Private Duty Nursing	4 870	217.5			Deaths	8.3
Personal Care/PC RN Su		51.0			Other	0.0
Other Home Health Care		0.0				
Homemkr & Other Non H		0.0				
TOTAL	XXXXXXX 1,208	XXXXX				
AGE AND SEX OF PATIENTS	PATIENT REIMBUR	CEMENT COIDCE				
Under 4 18.8%	Medicare	25.0%				
4 to 34 18.8	Medicaid	37.5				
35 to 54 25.0	Other Federal					
55 to 64 18.8	State Funds	0.0			STAFFING	FTES
65 to 74 0.0	Private Insur			·	Administrators	0.5
75 to 84 18.8	Self Pay	0.0			Reg. Nurse Supervisors	0.5
85 & over 0.0	Other	0.0			Registered Nurses	2.5
	TOTAL PATIENT	TS 16			Licensed Practical Nurses	1.5
Males 50.0% Females	50.0 %				Home Health Aides	0.0
					Physical Therapists	0.0
	RIMARY DIAGNOSIS		REVENUE		Occupational Therapists	0.0
Infectious Disorders	6.3% Digestive Disc		Billings \$	291,328	Speech Pathologists	0.0
Cancer	25.0 Genitourinary		Disallowances	20,548	Respiratory Therapists	0.0
Diabetes	6.3 Preg. & Childh		Collections	270,780	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropathies	0.0	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	6.3 Osteopathies 0.0 Perinatal Peri	18.8 Lod 0.0	Total	270,780	Personal Care Workers Homemakers	0.0
Psychoses/Neuroses Central Nervous Sys.	0.0 Ferinatal Peri		EXPENSES		Other Staff	1.8
Paralysis/CP	0.0 Fractures	6.3	Total \$	259,413	TOTAL FTES	6.7
Cardiovascular	0.0 Wounds, Burns	12.5	10041 5	200,410	TOTAL PIED	0.7
Stroke	0.0 Compl. of Sur					
Respiratory	0.0 Other Condition					
F 1						

Page 142 Gentiva Health Services COUNTIES SERVED

1970 Oakcrest Avenue, Suite 107 Roseville MN 55113 Out of State

Pierce Polk St. Croix

(800) 677-2244

800) 677-2244							
License Number: 211 Ownership of Agency: Pro		orporation	1		:	TOTAL NUMBER OF ADMISSIONS	13
Title 18 (Medicare) cert Title 19 (Medicaid) cert Affiliated with a hospit Number of unduplicated p	cified?	Yes Yes No 2004 =	23		1	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	0.0% 38.5 61.5 0.0
SERVICES PROVIDED	NO. OF	NO. OF VISITS	VISITS PER PATIENT		5	TOTAL NUMBER OF DISCHARGES (Including Deaths)	17
Skilled Nursing	14	91	6.5			(,	
Home Health Aide	2	43	21.5		J	PERCENT DISCHARGES TO:	
Physical Therapy	8	21	2.6			Private Residences	100.0%
Spch/Occ/Resp Therapy	0	0	0.0			General Hospitals	0.0
Medical Social Service	9 0	0	0.0			Nursing Homes	0.0
Private Duty Nursing	0	0	0.0			Deaths	0.0
Personal Care/PC RN Su		6,386	798.3			Other	0.0
Other Home Health Care		0	0.0				
Homemkr & Other Non HE		0	0.0				
TOTAL	XXXXXXX	6,541	XXXXX				
AGE AND SEX OF PATIENTS	PATIE	NT REIMBUE	RSEMENT SOURCE				
Under 4 0.0%		icare	4.3%				
4 to 34 30.4		icaid	4.3				
35 to 54 30.4	Oth	er Federal					
55 to 64 17.4	Sta	te Funds	0.0		9	STAFFING	FTES
65 to 74 8.7	Pri	vate Insur	cance 26.1			Administrators	0.1
75 to 84 4.3		f Pay	21.7			Reg. Nurse Supervisors	0.1
85 & over 8.7	Oth		43.5			Registered Nurses	0.6
		AL PATIENT	TS 23			Licensed Practical Nurses	0.5
Males 47.8% Females	52.2 %					Home Health Aides	0.1
DE	RIMARY DIAG	NOCTC		REVENUE		Physical Therapists	0.0
Infectious Disorders	0.0% Dige		orders 0.0%	Billings \$	521,471	Occupational Therapists Speech Pathologists	0.0
Cancer	4.3 Geni			Disallowances	40,823	Respiratory Therapists	0.0
Diabetes	21.7 Preq		4	Collections	480,648	Medical Social Workers	0.0
Diseases of Blood	0.0 Arth		0.0	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Oste		13.0	Total	480,648	Personal Care Workers	4.0
Psychoses/Neuroses	0.0 Peri				,	Homemakers	0.0
Central Nervous Sys.	4.3 Ill-1	Defined Co	ond. 0.0	EXPENSES		Other Staff	0.0
Paralysis/CP	0.0 Frac	tures	0.0	Total \$	492,332	TOTAL FTES	5.5
	17.4 Wound		13.0				
Stroke	0.0 Comp						
Respiratory	0.0 Othe	r Conditio	ons 4.3				

Page 143 COUNTIES SERVED Gentiva Health Services

1970 Oakcrest Avenue, Suite 107
Roseville MN 55113 Out of State

Pierce St. Croix

(651) 636-6330

51) 636-6330							
License Number: 286 Ownership of Agency: Pr Title 18 (Medicare) cer		-				FOTAL NUMBER OF ADMISSIONS PERCENT ADMISSIONS FROM:	2
Title 19 (Medicaid) cer)				Private Residences	100.0%
Affiliated with a hospi	tal? No)				General Hospitals	0.0
Number of unduplicated	patients in 2	004 =	10			Nursing Homes	0.0
						Other	0.0
	NO. OF	NO. OF	VISITS PER		,	TOTAL NUMBER OF DISCHARGES	
SERVICES PROVIDED		VISITS	PATIENT		•	(Including Deaths)	5
Skilled Nursing	7	547	78.1			(Including Deachs)	5
Home Health Aide	í	24	24.0		,	PERCENT DISCHARGES TO:	
Physical Therapy	0	0	0.0		•	Private Residences	100.0%
Spch/Occ/Resp Therapy		Ö	0.0			General Hospitals	0.0
Medical Social Service		0	0.0			Nursing Homes	0.0
Private Duty Nursing	0	0	0.0			Deaths	0.0
Personal Care/PC RN S	Supv. 0	0	0.0			Other	0.0
Other Home Health Car	e 3	981	327.0				
Homemkr & Other Non H	IH 0	0	0.0				
TOTAL	XXXXXXX	1,552	XXXXX				
AGE AND SEX OF PATIENTS	יי איז די איז	י ספידאיסווס	SEMENT SOURCE				
Under 4 0.0%	Medic		0.0%				
4 to 34 60.0	Medic		0.0				
35 to 54 20.0		Federal	0.0				
55 to 64 10.0		Funds	0.0		:	STAFFING	FTES
65 to 74 0.0		ite Insura			·	Administrators	0.1
75 to 84 0.0	Self		100.0			Reg. Nurse Supervisors	0.1
85 & over 10.0	Other		0.0			Registered Nurses	0.3
	TOTAL	PATIENTS	10			Licensed Practical Nurses	0.5
Males 40.0% Females	60.0 %					Home Health Aides	0.0
						Physical Therapists	0.0
P	RIMARY DIAGNO			REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digest			Billings \$	8,490	Speech Pathologists	0.0
Cancer	0.0 Genito			Disallowances	24	Respiratory Therapists	0.0
Diabetes		& Childbi		Collections	8,466	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthro		0.0	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteop		0.0	Total	8,466	Personal Care Workers	0.0
Psychoses/Neuroses	0.0 Perina			EVDENCEC		Homemakers	0.0
Central Nervous Sys. Paralysis/CP	0.0 Ill-De 10.0 Fractu		nd. 0.0 0.0	EXPENSES Total \$	10,795	Other Staff TOTAL FTES	$0.4 \\ 1.4$
Cardiovascular	0.0 Wounds		10.0	ıocaı ş	10,795	TOTAL FIED	1.4
Stroke	10.0 Compl.						
Respiratory		Condition					
Respiratory	10.0 OCHCI	COMMEDIA	50.0				

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Lakeview Hospital Homecare 5610 Norwich Parkway Stillwater MN 55082

Out of State

Barron Pierce Polk St. Croix

COUNTIES SERVED

(651) 430-3320

License Number: 260 Ownership of Agency: No	nprofit Corporati	on			TOTAL NUMBER OF ADMISSIONS	174
Title 18 (Medicare) cer Title 19 (Medicaid) cer Department of a hospita Number of unduplicated	tified? Yes tified? Yes l? Yes				PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	2.9% 62.6 10.3 24.1
SERVICES PROVIDED	NO. OF NO. PATIENTS VISI 153 9	TS PATIENT			TOTAL NUMBER OF DISCHARGES (Including Deaths)	166
Skilled Nursing Home Health Aide	51 1,4				PERCENT DISCHARGES TO:	
Physical Therapy	•	36 6.3			Private Residences	92.8%
Spch/Occ/Resp Therapy		87 4.6			General Hospitals	3.0
Medical Social Servic		4 2.0			Nursing Homes	3.0
Private Duty Nursing	0	0 0.0			Deaths	1.2
Personal Care/PC RN S	upv. 0	0 0.0			Other	0.0
Other Home Health Car	e 0	0 0.0				
Homemkr & Other Non H		71 23.7				
TOTAL	XXXXXXX 2,9	41 XXXXX				
AGE AND SEX OF PATIENTS	האתדפאת ספד	MBURSEMENT SOURCE				
Under 4 2.2%	Medicare	46.1%				
4 to 34 18.3	Medicaid	6.7				
35 to 54 32.8	Other Fed					
55 to 64 17.8	State Fun				STAFFING	FTES
65 to 74 5.6	Private I	nsurance 46.7			Administrators	1.0
75 to 84 16.1	Self Pay	0.0			Reg. Nurse Supervisors	0.0
85 & over 7.2	Other	0.6			Registered Nurses	0.0
	TOTAL PAT	IENTS 180			Licensed Practical Nurses	0.0
Males 33.3% Females	66.7 %				Home Health Aides	1.1
D	RIMARY DIAGNOSIS		REVENUE		Physical Therapists	0.0
Infectious Disorders	0.6% Digestive	Disorders 0.6%	Billings \$	463,590	Occupational Therapists Speech Pathologists	0.0
Cancer	2.8 Genitourin		Disallowances	131,227	Respiratory Therapists	0.0
Diabetes	0.6 Preq. & Ch		Collections	332,363	Medical Social Workers	0.5
Diseases of Blood	0.0 Arthropath		Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.6 Osteopathi		Total	332,363	Personal Care Workers	0.0
Psychoses/Neuroses	0.0 Perinatal			•	Homemakers	0.0
Central Nervous Sys.	0.6 Ill-Define	d Cond. 0.0	EXPENSES		Other Staff	0.0
Paralysis/CP	0.0 Fractures	4.4	Total \$	317,579	TOTAL FTES	2.6
Cardiovascular	11.7 Wounds, Bu					
Stroke	0.0 Compl. of					
Respiratory	0.0 Other Cond	itions 21.1				

St. Elizabeth Home Health Care

1200 West 5th Grant Boulevard

Wabasha MN 55981

Out of State

COUNTIES SERVED Buffalo Pepin

(651) 565-5577

License Number: 356	5 L . 61 1 /	/ 				TOTAL NUMBER OF ADMISSIONS	26
Ownership of Agency: Non Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital	rified? Yes rified? Yes res	_			:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals	0.0%
Number of unduplicated p	oatients in 200)4 = 2	3			Nursing Homes Other	15.4 15.4
SERVICES PROVIDED	PATIENTS VI	SITS PAT	TS PER IENT		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	19
Skilled Nursing Home Health Aide	23 5	41	5.9 8.2		:	PERCENT DISCHARGES TO:	
Physical Therapy	3		4.3			Private Residences	57.9%
Spch/Occ/Resp Therapy Medical Social Service	1		2.0			General Hospitals Nursing Homes	21.1 10.5
Private Duty Nursing	0		0.0			Deaths	0.0
Personal Care/PC RN Su	-	-	2.3			Other	10.5
Other Home Health Care		0	0.0				
Homemkr & Other Non HH	- •	0	0.0				
TOTAL	XXXXXXX	745 XX	XXX				
AGE AND SEX OF PATIENTS	DATTENT R	REIMBURSEMEN	T SOURCE				
Under 4 0.0%	Medicar		41.7%				
4 to 34 0.0	Medicai		25.0				
35 to 54 8.7	Other F	Federal	0.0				
55 to 64 26.1	State F	Tunds	0.0		1	STAFFING	FTES
65 to 74 17.4		e Insurance	16.7			Administrators	0.0
75 to 84 8.7	Self Pa	ay	16.7			Reg. Nurse Supervisors	0.0
85 & over 39.1	Other		0.0			Registered Nurses	0.2
Malas 20 18 Famalas		PATIENTS	24			Licensed Practical Nurses Home Health Aides	0.0 0.1
Males 39.1% Females	60.9 6					Physical Therapists	0.1
PR	RIMARY DIAGNOSI	rs		REVENUE		Occupational Therapists	0.0
Infectious Disorders	0.0% Digestiv		8.7%	Billings \$	27,735	Speech Pathologists	0.0
Cancer	4.3 Genitour		4.3	Disallowances	7,882	Respiratory Therapists	0.0
Diabetes	4.3 Preg. &	Childbirth	0.0	Collections	19,853	Medical Social Workers	0.0
Diseases of Blood	0.0 Arthropa		8.7	Other	0	Other Therapeutic Staff	0.0
Dementia/Alzheimers	0.0 Osteopat		0.0	Total	19,853	Personal Care Workers	0.3
Psychoses/Neuroses	0.0 Perinata		0.0	EWDENG-5		Homemakers	0.0
Central Nervous Sys.	0.0 Ill-Defi		0.0	EXPENSES	20 007	Other Staff	1.0
Paralysis/CP Cardiovascular	0.0 Fracture 39.1 Wounds,		0.0 13.0	Total \$	28,987	TOTAL FTES	1.5
Stroke		of Surgery	8.7				
Respiratory	8.7 Other Co		0.0				
F 1							

COUNTIES SERVED

Buffalo Trempealeau

(507) 457-4468

Out of State

License Number: 318 Ownership of Agency: Non	profit Corr	ooration			•	TOTAL NUMBER OF ADMISSIONS	25
Title 18 (Medicare) cert Title 19 (Medicaid) cert Department of a hospital Number of unduplicated p	ified?	les les les	28		:	PERCENT ADMISSIONS FROM: Private Residences General Hospitals Nursing Homes Other	12.0% 40.0 12.0 36.0
SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT		•	TOTAL NUMBER OF DISCHARGES (Including Deaths)	25
Skilled Nursing	25	222	8.9				
Home Health Aide	5 7	232	46.4 6.6			PERCENT DISCHARGES TO:	00 08
Physical Therapy Spch/Occ/Resp Therapy	, 5	46 32	6.6 6.4			Private Residences General Hospitals	92.0% 0.0
Medical Social Service		32 0	0.0			Nursing Homes	4.0
Private Duty Nursing	0	0	0.0			Deaths	0.0
Personal Care/PC RN Su		0	0.0			Other	4.0
Other Home Health Care		0	0.0			Ocher	4.0
Homemkr & Other Non HH	_	18	9.0				
TOTAL	XXXXXXX	550	XXXXX				
AGE AND SEX OF PATIENTS Under 4 0.0% 4 to 34 3.6 35 to 54 3.6	Med: Med:	NT REIMBUR icare icaid er Federal	2. SEMENT SOURCE 58.6% 3.4 0.0				
55 to 64 7.1		e Funds	0.0			STAFFING	FTES
65 to 74 25.0		ate Insur				Administrators	0.3
75 to 84 46.4		E Pay	17.2			Reg. Nurse Supervisors	0.4
85 & over 14.3	Othe		3.4			Registered Nurses	1.9
		AL PATIENT	.'S 29			Licensed Practical Nurses	0.3
Males 42.9% Females	57.1 %					Home Health Aides	0.8
77	TWADY DIAG	TO 0 T 0		REVENUE		Physical Therapists	0.9
Infectious Disorders	IMARY DIAGI 0.0% Dige		rdora 2 6%	REVENUE Billings \$	4E 040	Occupational Therapists Speech Pathologists	0.7 0.0
Cancer Diabetes Diseases of Blood Dementia/Alzheimers Psychoses/Neuroses Central Nervous Sys. Paralysis/CP Cardiovascular Stroke	0.0% Diges 0.0 Genit 0.0 Preg 0.0 Arth 0.0 Ostec 3.6 Perir 0.0 Ill-I 0.0 Fract 14.3 Wound 7.1 Compo	courinary & Childb copathies opathies natal Peri Defined Co cures ds, Burns L. of Surg	Sys. 0.0 pirth 0.0 14.3 0.0 od 0.0 ond. 10.7 0.0 0.0 0.0 0.0	Disallowances Collections Other Total EXPENSES Total \$	45,040 9,343 35,697 0 35,697	Respiratory Therapists Medical Social Workers Other Therapeutic Staff Personal Care Workers Homemakers Other Staff TOTAL FTES	0.0 0.0 0.0 0.0 0.0 0.0 5.2

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Caregivers Home Health COUNTIES SERVED 1037 Lake Avenue Dane Woodstock WI 60098 Out of State Kenosha Racine (800) 338-0477 Rock Walworth License Number: 257 TOTAL NUMBER OF ADMISSIONS Ownership of Agency: Proprietary Corporation Title 18 (Medicare) certified? PERCENT ADMISSIONS FROM: Yes Title 19 (Medicaid) certified? Yes Private Residences 69.0% Affiliated with a hospital? General Hospitals 23.8 No Number of unduplicated patients in 2004 = 68 Nursing Homes 0.0 Other 7.1 NO. OF NO. OF VISITS PER TOTAL NUMBER OF DISCHARGES PATIENTS VISITS SERVICES PROVIDED PATIENT (Including Deaths) 22 Skilled Nursing 53 215 4.1 PERCENT DISCHARGES TO: Home Health Aide 4 1,515 378.8 Physical Therapy 0 Ω 0.0 Private Residences 59.1% Spch/Occ/Resp Therapy 162 81.0 General Hospitals 18.2 2 Medical Social Service 0.0 Nursing Homes Ω 0 0.0 Private Duty Nursing 16 1,662 103.9 Deaths 13.6 Personal Care/PC RN Supv. 7,780 82.8 Other 9.1 94 Other Home Health Care Ω 0 0.0 Homemkr & Other Non HH Ω 0 0.0 TOTAL XXXXXXX 11,334 XXXXX AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 2.9% Medicare 2.28 4 to 34 36.8 Medicaid 93.3 35 to 54 Other Federal 25.0 0.0 55 to 64 State Funds STAFFING FTES 19.1 0.0 65 to 74 2.9 Private Insurance 2.2 Administrators 0.6 75 to 84 Req. Nurse Supervisors 5.9 Self Pav 1.1 1.4 85 & over 7.4 Other 1.1 Registered Nurses 2.0 TOTAL PATIENTS 89 Licensed Practical Nurses 10.1 Males 36.8% Females 63.2 % Home Health Aides 4.8 Physical Therapists 0.0 PRIMARY DIAGNOSIS REVENUE Occupational Therapists 0.0 Infectious Disorders 0.0% Digestive Disorders 1.5% Speech Pathologists Billings \$ 1,068,733 0.0

0.0

0.0

5.9

0.0

4.4

5.9

1.5

0.0

0.0

19.1

Disallowances

EXPENSES

\$

Collections

Other

Total

Total

150,730

918,003

918,003

909,059

Respiratory Therapists

Medical Social Workers

Personal Care Workers

Homemakers

Other Staff

TOTAL FTES

Other Therapeutic Staff

0.0

0.0

0.0

0.8

0.0

2.8

22.4

8.8 Genitourinary Sys.

4.4 Preq. & Childbirth

7.4 Perinatal Period

5.9 Compl. of Surgery

4.4 Other Conditions

0.0 Arthropathies

0.0 Osteopathies

5.9 Wounds, Burns

13.2 Fractures

Central Nervous Sys. 11.8 Ill-Defined Cond.

Cancer

Stroke

Diabetes

Diseases of Blood

Paralysis/CP

Respiratory

Cardiovascular

Dementia/Alzheimers

Psvchoses/Neuroses

STATE OF WISCONSIN TOTALS

Respiratory

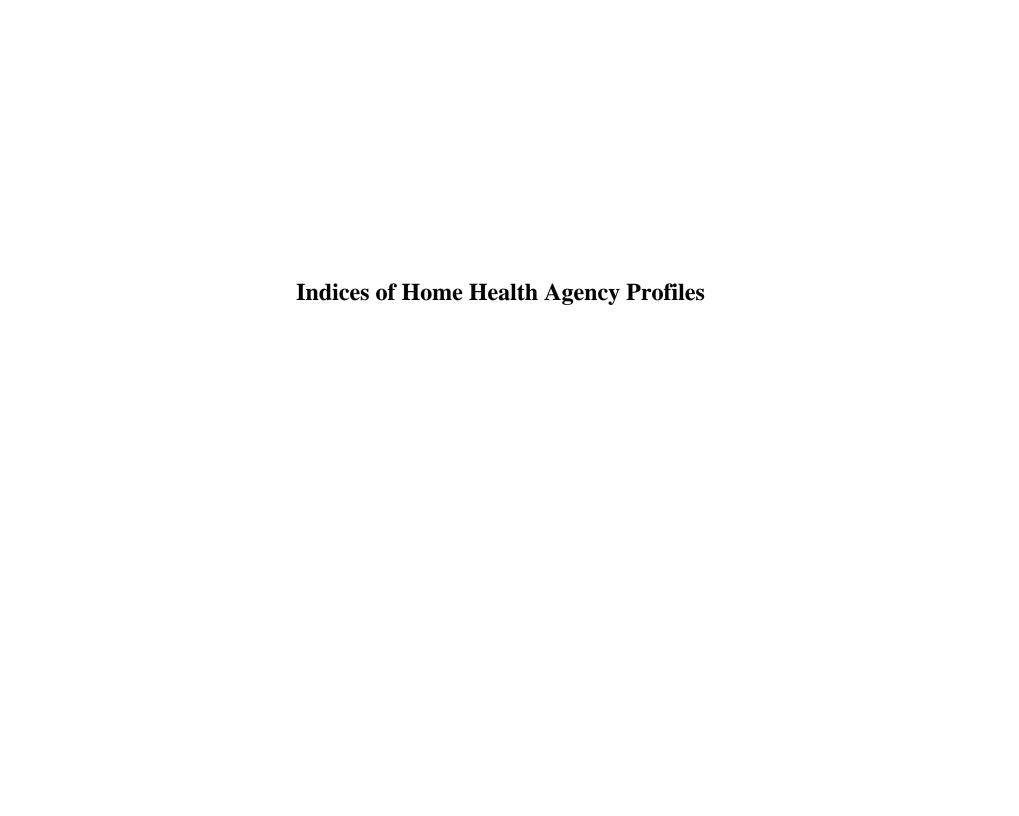
5.2 Other Conditions

Number of unduplicated patients in 2004 = 69,510 TOTAL NUMBER OF ADMISSIONS 62,824 PERCENT ADMISSIONS FROM: Private Residences 25.1% NO. OF NO. OF VISITS PER General Hospitals 60.4 SERVICES PROVIDED PATIENTS VISITS PATIENT Nursing Homes 8.1 Skilled Nursing 57,846 758,411 13.1 Other 6.4 Home Health Aide 15,927 542,189 34.0 220,038 Physical Therapy 28,827 7.6 TOTAL NUMBER OF DISCHARGES Spch/Occ/Resp Therapy 13,057 106,225 8.1 (INCLUDING DEATHS) 62,805 Medical Social Service 4,970 9,818 2.0 Private Duty Nursing 338 PERCENT DISCHARGES TO: 48,183 142.6 Personal Care/PC RN Supv.13,323 1,700,189 127.6 Private Residences 77.4 Other Home Health Care 122 25.0 General Hospitals 7.4 3,056 Homemkr & Other Non HH 1,232 108,742 88.3 Nursing Homes 4.1 TOTAL XXXXXX 3,496,851 XXXXX Deaths 2.5 Other 8.6 AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE Under 4 5.1 Medicare 56.7% 4 to 34 6.2 Medicaid 16.2 35 to 54 13.2 Other Federal 0.2 55 to 64 11.9 State Funds 1.3 65 to 74 16.9 Priv. Insurance 20.6 75 to 84 27.3 Self Pay 3.2 85 & over 19.4 Other 1.7 STAFFING FTES TOTAL PATIENTS 72,876 Administrators 120.9 Males 41.0 % Females 59.0 % Req. Nurse Supervisors 183.9 Registered Nurses 1025.9 Licensed Practical Nurses 164.0 PRIMARY DIAGNOSIS REVENUE Infectious Disorders 0.9% Digestive Disorders 2.9% Billings \$267,732,062 Home Health Aides 773.2 Cancer 5.1 Genitourinary Sys. 2.1 Disallowances 43,965,099 Physical Therapists 171.0 Diabetes 4.5 Preq. & Childbirth Collections 223,766,963 Occupational Therapists 0.3 55.2 Diseases of Blood 1.0 Arthropathies 8.7 Other Speech Pathologists 11.5 4,525,282 Dementia/Alzheimers 0.7 Osteopathies 1.3 Total 228,292,245 Respiratory Therapists 13.0 Medical Social Workers Psychoses/Neuroses 1.6 Perinatal Period 3.4 36.8 Central Nervous Sys. 2.1 Ill-Defined Cond. EXPENSES Other Therapeutic Staff 6.5 18.8 \$238,493,023 Personal Care Workers Paralvsis/CP 1.4 Fractures 2.7 Total 1241.2 Cardiovascular 12.8 Wounds, Burns Homemakers 129.3 2.3 2.0 Compl. of Surgery Stroke Other Staff 681.6 4.0

28.5

TOTAL FTES

4626.2



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6	14	Bellin Home Health Agency	Green Bay	Brown
7	218	Heartland Home Health Care	Green Bay	Brown
8	154	Home Care Advantage	Green Bay	Brown
9	266	Interim Healthcare of Northeastern Wisconsin	Green Bay	Brown
10	35	St. Vincent Hospital Home Health Care	Green Bay	Brown
11	41	Burnett Co. Dept. of Health and Human Services	Siren	Burnett
12	42	Calumet County Health Department Home Health Agency	Chilton	Calumet
13	43	Chippewa County Department of Public Health	Chippewa Falls	Chippewa
14	158	St. Joseph's Hospital Home Health Agency	Chippewa Falls	Chippewa
15	146	Memorial Hospital	Neillsville	Clark
16	328	Divine Savior Home Care	Portage	Columbia
17	46	Prairie du Chien Memorial Hospital Home Health Care	Prairie du Chien	Crawford
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19	176	Home Health United VNS	Madison	Dane
20	294	Independent Health Care	Madison	Dane
21	206	Interim Healthcare of Madison	Madison	Dane
22	222	Meriter Home Care Agency	Madison	Dane
23	252	University Hospital Home Health Agency	Middleton	Dane
24	341	Stoughton Hospital Home Health United	Stoughton	Dane
25	188	Hillside Home Health	Beaver Dam	Dodge
26	134	Marquardt Memorial Manor	Watertown	Dodge
27	165	Watertown Memorial Hospital Home Health Program	Watertown	Dodge
28	187	Door County Memorial Home Health	Sturgeon Bay	Door
29	50	Douglas County Home Health Care Unit	Superior	Douglas
30	172	The Dove, Inc.	Superior	Douglas
31	310	Aurora Community Health	Menomonie	Dunn
32	51	Dunn County Home Health Care	Menomonie	Dunn
33	335	Lifenet	Eau Claire	Eau Claire
34	1010	Mission Home Health Lutheran Social Services	Eau Claire	Eau Claire
35	127	Northwest Wisconsin Homecare	Eau Claire	Eau Claire
36	54	Fond du Lac County Home Health Service	Fond du Lac	Fond du Lac
37	55	St. Agnes Hospital Home Care Services	Fond du Lac	Fond du Lac
38	57	Grant County Home Nursing Service	Lancaster	Grant
39	330	Homeward Bound Home Health	Lancaster	Grant
40	142	The Monroe Clinic Home Care	Monroe	Green
41	235	CHN Home Care	Berlin	Green Lake
42	60	Upland Hills Home Care	Dodgeville	Iowa
43	219	Pine View Home Health	Black River Falls	Jackson
44	137	Fort Healthcare Home Health	Fort Atkinson	Jefferson

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47	216	Hess Home Health	Mauston	Juneau
48	1035	The Caring Heart	Franksville	Kenosha
49	65	Kenosha VNA	Kenosha	Kenosha
50	130	Alliance Home Care	Pleasant Prairie	Kenosha
51	1028	Caregivers La Crosse	La Crosse	La Crosse
52	141	Franciscan Skemp Medical Center HHS	La Crosse	La Crosse
53	1027	Gundersen Lutheran Medical Center	La Crosse	La Crosse
54	66	La Crosse County Health Department	La Crosse	La Crosse
55	68	Lafayette County Nursing Agency	Darlington	Lafayette
56	69	Langlade County Health Department	Antigo	Langlade
57	143	Holy Family Memorial Home Care	Manitowoc	Manitowoc
58	1	Homecare Health Services	Manitowoc	Manitowoc
59	73	Aspirus VNA Home Health Inc.	Wausau	Marathon
60	277	Interim Healthcare	Wausau	Marathon
61	1005	Caregivers Home Health	Marinette	Marinette
62	256	Northland Lutheran HHS	Marinette	Marinette
63	241	Northland Home Health	Westfield	Marquette
64	150	Horizon Home Care and Hospice	Brown Deer	Milwaukee
65	1032	Regal Home Health Services	Brown Deer	Milwaukee
66	326	Affiliated Home Health Care	Milwaukee	Milwaukee
67	81	Aurora Visiting Nurse Association of Wisconsin	Milwaukee	Milwaukee
68	123	Barry Healthcare Services	Milwaukee	Milwaukee
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71	1029	Maxim Healthcare Services	Milwaukee	Milwaukee
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73	309	Midamerica Healthcare Corporation WI	Milwaukee	Milwaukee
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77	122	Anew Home Health Care	Wauwatosa	Milwaukee
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79	278	Preferred Home Health Services	Wauwatosa	Milwaukee
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81	1031	Aseracare Home Health	West Allis	Milwaukee
82	237	Gentiva Health Services	West Allis	Milwaukee
83	287	Gentiva Health Services	West Allis	Milwaukee
84	279	Professional Home Care Services	West Allis	Milwaukee
85	83	Monroe County Health Department	Sparta	Monroe
86	1017	The Woodlands Home Health	Suring	Oconto
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88	89	Ozaukee County Public Health Department	Port Washington	Ozaukee

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92	92	Polk County Home Care Program	Balsam Lake	Polk
93	27	Community Health Resources	Park Falls	Price
94	202	Supportive Home Services	Park Falls	Price
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96	3	Gentiva Health Services	Racine	Racine
97	305	SAI Home Health Care	Racine	Racine
98	1015	Accura Home Health	Avalon	Rock
99	98	At Home Healthcare	Beloit	Rock
100	159	Memorial Community Hospital Home Health Agency	Edgerton	Rock
101	99	Mercy Assisted Care	Janesville	Rock
102	295	Indianhead Home Health Care	Ladysmith	Rusk
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104	128	Heartland Home Health	Baldwin	St. Croix
105	36	REM Health of Wisconsin	Baraboo	Sauk
106	102	Sauk County Health Department	Baraboo	Sauk
107	103	Sawyer County Health and Human Services	Hayward	Sawyer
108	124	St. Nicholas Hospital Home Health and Hospice	Sheboygan	Sheboygan
109	107	Trempealeau County Health Department	Whitehall	Trempealeau
110	271	Vernon Memorial Hospital Home Health Care Agency	Viroqua	Vernon
111	125	Home Care Network	Lake Geneva	Walworth
112	304	Hearts of Gold	Shell Lake	Washburn
113	324	Indianhead Medical Center Home Health Agency	Shell Lake	Washburn
114	208	Spooner Health Services Home Care	Spooner	Washburn
115	1024	Heartland Home Health Care and Hospice	West Bend	Washington
116	280	Heartland Home Health Care and Hospice	Brookfield	Waukesha
117	1022	LS Prof Comfort Homes	Brookfield	Waukesha
118	1009	Universal Pediatric Services	Brookfield	Waukesha
119	170	Prohealth Home Care	Hartland	Waukesha
120	240	Hannah Home Health Care	Mukwonago	Waukesha
121	247	Coram Alternate Site Services Inc.	New Berlin	Waukesha
122	1025	Oconomowoc Home Health Care LLC	Oconomowoc	Waukesha
123	220	Lutheran Social Services Home Care	Waukesha	Waukesha
124	24	REM Health of Wisconsin	Waupaca	Waupaca
125	157	Preferred Home Health Care	Menasha	Winnebago
126	88	Thedacare At Home	Neenah	Winnebago
127	144	Affinity Visiting Nurses	Oshkosh	Winnebago
128	214	Clarity Care	Oshkosh	Winnebago
129	17	Homemakers Inc of Oshkosh	Oshkosh	Winnebago
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136	1013	United Home Care	Iron River	Out of State
137	190	Caring Home Health	Ironwood	Out of State
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139	340	Hiawatha Homecare	Red Wing	Out of State
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141	248	Interim Healthcare Rockford	Rockford	Out of State
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84	279	Professional Home Care Services	West Allis	Milwaukee
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147	257	Caregivers Home Health	Woodstock	Out of State

98 1015 Accura Home Health Services 98 1015 Accura Home Health Care 98 1015 Accura Home Health Care 98 1015 Affillated Home Health Care 127 144 Affillated Home Health Care 128 Affillated Home Health Care 130 Alliance Home Care 129 Anew Home Health Care 131 131 Aperacare Home Health Care 131 131 Aperacare Home Health Inc. 132 Appirus VNA Home Health Inc. 133 Appirus VNA Home Health Inc. 134 Appirus VNA Home Health Inc. 135 Appirus VNA Home Health Inc. 136 Appirus VNA Home Health Inc. 137 Appirus VNA Home Health 138 Aurora Community Health 139 Page At Home Health Services 130 Aurora VNA Sof Wisconsin 131 Aurora VNA Sof Wisconsin 132 Aurora VNA Sof Wisconsin 133 Aurora VNA Sof Wisconsin 134 Aurora VNA Sof Wisconsin 135 Appirus VNA Health Papartment 136 Aurora VNA Sof Wisconsin 137 Appirus VNA Health Papartment 138 Aurora VNA Sof Wisconsin 149 Bay Area Health, LLC 140 Appirus VNA Ashburn 151 Appirus VNA Health Department 152 Appirus VNA Health Department 153 Appirus VNA Health Department 154 Bellin Home Health Agency 155 Appirus VNA Health Department Home Health Agency 156 Appirus VNA Health Department Home Health Agency 157 Appirus VNA Health Department Home Health Agency 158 Appirus VNA Health Department Home Health Agency 159 Appirus VNA Health Department Home Health Agency 150 Caregivers Home Health 151 Appirus VNA Health Department Of Public Health 152 Caregivers Home Health 153 Catalyst, Inc. 158 Caregivers Locase 159 Appirus VNA Health Agency 159 Appirus VNA Health Agency 150 Caregivers Home Health 151 Appirus VNA Health Agency 151 Appirus VNA Health Agency 152 Appirus VNA Health Agency 153 Appirus VNA Health Agency 154 Clarity Care 155 Appirus VNA Health Agency 156 Appirus VNA Health Agency 157 Appirus VNA Health Agency 158 Appirus VNA Health Agency 159 Appirus VNA Health Agency 150 Appirus VNA Health Agency 150 Appirus VNA Health Agency 151 Appirus VNA Health Agency 152 Appirus VNA Health	PAGE	LICENSE	AGENCY NAME	CITY	COUNTY
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28 187 Door County Memorial Home Health Sturgeon Bay Door 29 50 Douglas County Home Health Care Unit Superior Douglas 32 51 Dunn County Home Health Care Menomonie Dunn 95 238 Flambeau Home Health and Hospice Phillips Price 36 54 Fond du Lac County Home Health Service Fond du Lac Fond du Lac 44 137 Fort Healthcare Home Health Fort Atkinson Jefferson 52 141 Franciscan Skemp Medical Center HHS La Crosse La Crosse 96 3 Gentiva Health Services Racine Racine 142 211 Gentiva Health Services Roseville Out of State 143 286 Gentiva Health Services Roseville Out of State 143 286 Gentiva Health Services Roseville Mest Allis Milwaukee	135	314		Iron Mountain	Out of State
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82 237 Gentiva Health Services West Allis Milwaukee	142	211	Gentiva Health Services	Roseville	Out of State
82 237 Gentiva Health Services West Allis Milwaukee	143	286	Gentiva Health Services	Roseville	Out of State
		237	Gentiva Health Services	West Allis	Milwaukee
	83	287	Gentiva Health Services	West Allis	Milwaukee

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53	1027	Gundersen Lutheran Medical Center	La Crosse	La Crosse
120	240	Hannah Home Health Care	Mukwonago	Waukesha
104	128	Heartland Home Health	Baldwin	St. Croix
7	218	Heartland Home Health Care	Green Bay	Brown
116	280	Heartland Home Health Care and Hospice	Brookfield	Waukesha
115	1024	Heartland Home Health Care and Hospice	West Bend	Washington
112	304	Hearts of Gold	Shell Lake	Washburn
47	216	Hess Home Health	Mauston	Juneau
139	340	Hiawatha Homecare	Red Wing	Out of State
25	188	Hillside Home Health	Beaver Dam	Dodge
57	143	Holy Family Memorial Home Care	Manitowoc	Manitowoc
8	154	Home Care Advantage	Green Bay	Brown
111	125	Home Care Network	Lake Geneva	Walworth
19	176	Home Health United VNS	Madison	Dane
58	1	Homecare Health Services	Manitowoc	Manitowoc
129	17	Homemakers Inc of Oshkosh	Oshkosh	Winnebago
39	330	Homeward Bound Home Health	Lancaster	Grant
64	150	Horizon Home Care and Hospice	Brown Deer	Milwaukee
20	294	Independent Health Care	Madison	Dane
102	295	Indianhead Home Health Care	Ladysmith	Rusk
113	324	Indianhead Medical Center Home Health Agency	Shell Lake	Washburn
60	277	Interim Healthcare	Wausau	Marathon
132	284	Interim Healthcare Lake Superior	Duluth	Out of State
141	248	Interim Healthcare Rockford	Rockford	Out of State
21	206	Interim Healthcare of Madison	Madison	Dane
9	266	Interim Healthcare of Northeastern Wisconsin	Green Bay	Brown
45	63	Jefferson County Health Department	Jefferson	Jefferson
46	135	KJM Home Health Care Agency	Watertown	Jefferson
49	65	Kenosha VNA	Kenosha	Kenosha
117	1022	LS Prof Comfort Homes	Brookfield	Waukesha
54	66	La Crosse County Health Department	La Crosse	La Crosse
70	147	Laabs Home Health Care	Milwaukee	Milwaukee
55	68	Lafayette County Nursing Agency	Darlington	Lafayette
144	260	Lakeview Hospital Homecare	Stillwater	Out of State
3	151	Lakeview Medical Center	Rice Lake	Barron
56	69	Langlade County Health Department	Antigo	Langlade
33	335	Lifenet	Eau Claire	Eau Claire
123	220	Lutheran Social Services Home Care	Waukesha	Waukesha
26	134	Marquardt Memorial Manor	Watertown	Dodge
138	207	Marquette General Home Health	Kingsford	Out of State
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72	23	Metro Home Health Services	Milwaukee	Milwaukee
73	309	Midamerica Healthcare Corporation WI	Milwaukee	Milwaukee
130	182	Ministry Home Care Home Health - Marshfield	Marshfield	Wood
87	253	Ministry Home Care Home Health Rhinelander	Rhinelander	Oneida
34	1010	Mission Home Health Lutheran Social Services	Eau Claire	Eau Claire
85	83	Monroe County Health Department	Sparta	Monroe
1	139	Moundview Memorial Hospital and Clinic	Adams	Adams
63	241	Northland Home Health	Westfield	
62	256	Northland Lutheran HHS		Marquette
	⊿56 127	Northwest Wisconsin Homecare	Marinette Eau Claire	Marinette Eau Claire
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76	225	Nursing Consultation & Care Management	Shorewood	Milwaukee
122	1025	Oconomowoc Home Health Care LLC	Oconomowoc	Waukesha
88	89	Ozaukee County Public Health Department	Port Washington	Ozaukee
89	90	Pepin County Nursing Service	Durand	Pepin
90	91	Pierce County Home Care	Ellsworth	Pierce
43	219	Pine View Home Health	Black River Falls	Jackson
92	92	Polk County Home Care Program	Balsam Lake	Polk
17	46	Prairie du Chien Memorial Hospital Home Health Care	Prairie du Chien	Crawford
125	157	Preferred Home Health Care	Menasha	Winnebago
79	278	Preferred Home Health Services	Wauwatosa	Milwaukee
84	279	Professional Home Care Services	West Allis	Milwaukee
119	170	Prohealth Home Care	Hartland	Waukesha
74	1023	Quality Assurance Home Health Services	Milwaukee	Milwaukee
105	36	REM Health of Wisconsin	Baraboo	Sauk
124	24	REM Health of Wisconsin	Waupaca	Waupaca
140	215	Red Wing Regional Home Health	Red Wing	Out of State
65	1032	Regal Home Health Services	Brown Deer	Milwaukee
103	100	Rusk County Department of Health and Human Services	Ladysmith	Rusk
97	305	SAI Home Health Care	Racine	Racine
106	102	Sauk County Health Department	Baraboo	Sauk
107	103	Sawyer County Health and Human Services	Hayward	Sawyer
114	208	Spooner Health Services Home Care	Spooner	Washburn
91	349	Spring Valley Home Health Services	Spring Valley	Pierce
37	55	St. Agnes Hospital Home Care Services	Fond du Lac	Fond du Lac
145	356	St. Elizabeth Home Health Care	Wabasha	Out of State
14	158	St. Joseph's Hospital Home Health Agency	Chippewa Falls	Chippewa
133	169	St. Lukes Home Health Services	Duluth	Out of State
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40	142	The Monroe Clinic Home Care	Monroe	Green
86	1017	The Woodlands Home Health	Suring	Oconto
126	88	Thedacare At Home	Neenah	Winnebago
109	107	Trempealeau County Health Department	Whitehall	Trempealeau
136	1013	United Home Care	Iron River	Out of State
118	1009	Universal Pediatric Services	Brookfield	Waukesha
23	252	University Hospital Home Health Agency	Middleton	Dane
42	60	Upland Hills Home Care	Dodgeville	Iowa
110	271	Vernon Memorial Hospital Home Health Care Agency	Viroqua	Vernon
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129	17	Homemakers Inc of Oshkosh	Oshkosh	Winnebago
72	23	Metro Home Health Services	Milwaukee	Milwaukee
124	24	REM Health of Wisconsin	Waupaca	Waupaca
93	27	Community Health Resources	Park Falls	Price
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105	36	REM Health of Wisconsin	Baraboo	Sauk
11	41	Burnett Co. Dept. of Health and Human Services	Siren	Burnett
12	42	Calumet County Health Department Home Health Agency	Chilton	Calumet
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17	46	Prairie du Chien Memorial Hospital Home Health Care	Prairie du Chien	Crawford
29	50	Douglas County Home Health Care Unit	Superior	Douglas
32	51	Dunn County Home Health Care	Menomonie	Dunn
36	54	Fond du Lac County Home Health Service	Fond du Lac	Fond du Lac
37	55	St. Agnes Hospital Home Care Services	Fond du Lac	Fond du Lac
38	57	Grant County Home Nursing Service	Lancaster	Grant
42	60	Upland Hills Home Care	Dodgeville	Iowa
45	63	Jefferson County Health Department	Jefferson	Jefferson
49	65	Kenosha VNA	Kenosha	Kenosha
54	66	La Crosse County Health Department	La Crosse	La Crosse
55	68	Lafayette County Nursing Agency	Darlington	Lafayette
56	69	Langlade County Health Department	Antigo	Langlade
59	73	Aspirus VNA Home Health Inc.	Wausau	Marathon
67	81	Aurora Visiting Nurse Association of Wisconsin	Milwaukee	Milwaukee
85	83	Monroe County Health Department	Sparta	Monroe
126	88	Thedacare At Home	Neenah	Winnebago
88	89	Ozaukee County Public Health Department	Port Washington	Ozaukee
89	90	Pepin County Nursing Service	Durand	Pepin
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77	122	Anew Home Health Care	Wauwatosa	Milwaukee
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46	135	KJM Home Health Care Agency	Watertown	Jefferson
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95 238 Plambeau Home Health and Hospice Millips Price 120 240 Hannah Home Health Care Mulwonago Naukesha 63 241 Northland Home Health Reservices Inc. New Berlin Marquette 121 247 Coram Alternate Site Services Inc. New Berlin Maukesha 141 248 Interim Healthcare Rockford Rockford Out of State 2 251 Bay Area Health, LEC Ashland Ashland Ashland 87 253 Ministry Home Care Home Health Agency Middleton Dane 87 253 Ministry Home Care Home Health Rhinelander Rhinelander Oneida 62 256 Northland Lutheran HHS Marinette Marinette 147 257 Caregivers Home Health 149 256 Lakeview Hospital Homecare Stillwater Out of State 9 266 Interim Healthcare of Northeastern Wisconsin Green Bay Brown 110 277 Interim Healthcare of Northeastern Wisconsin Green Bay Brown 120 277 Interim Healthcare Services Wausau Marathon 130 278 Preferred Home Health Services Wausau Marathon 141 280 Heartland Home Health Care Agency Viroqua Vernon 151 279 Professional Home Care Services West Allis Milwaukee 152 141 10 270 Professional Home Care Services West Allis Milwaukee 153 281 Interim Healthcare Lake Superior Duluth Out of State 154 256 Gentiva Health Services Roseville Out of State 155 Indianhead Home Health Care Madison Dane 156 250 160 ANS Home Health Care Madison Dane 157 250 ANS Home Health Care Madison Dane 158 31 Allor Milwaukee Milwaukee Milwaukee 159 Indianhead Home Health Care Madison Dane 150 251 Indianhead Home Health Care Madison Dane 150 310 Aurora Community Health Mene Meath Milwaukee Milwaukee Milwaukee 157 310 Midanhead Medical Center Home Health Agency Shell Lake Mashburn 158 312 Vour Nurse Home Health Care Milwaukee Milwaukee Milwaukee 150 36 ANS Home Health Care Madison Dane 151 310 Aurora Community Health Care Milwaukee					
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121 247 Coram Alternate Site Services Inc. New Berlin Maukesha					
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PAGE	LICENSE	AGENCY NAME	CITY	COUNTY
118	1009	Universal Pediatric Services	Brookfield	Waukesha
34	1010	Mission Home Health Lutheran Social Services	Eau Claire	Eau Claire
136	1013	United Home Care	Iron River	Out of State
98	1015	Accura Home Health	Avalon	Rock
86	1017	The Woodlands Home Health	Suring	Oconto
117	1022	LS Prof Comfort Homes	Brookfield	Waukesha
74	1023	Quality Assurance Home Health Services	Milwaukee	Milwaukee
115	1024	Heartland Home Health Care and Hospice	West Bend	Washington
122	1025	Oconomowoc Home Health Care LLC	Oconomowoc	Waukesha
53	1027	Gundersen Lutheran Medical Center	La Crosse	La Crosse
51	1028	Caregivers La Crosse	La Crosse	La Crosse
71	1029	Maxim Healthcare Services	Milwaukee	Milwaukee
81	1031	Aseracare Home Health	West Allis	Milwaukee
65	1032	Regal Home Health Services	Brown Deer	Milwaukee
48	1035	The Caring Heart	Franksville	Kenosha